Case 18-13452 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Doc 1 Document Page 1 of 57

Fill in this information to identify your case:	ILED
United States Bankruptcy Court for the: Northern District of Illinois	STÂTES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS
Case number (ir known):	Chapter you are filing under:
	Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number

		About Debtor 1:	y Nag II.	About Debtor 2 (Spouse Only in a Joint Case
١,	Your full name			- (opodse Omy in a Joint Case)
	Write the name that is on your government-issued picture	Allen		
	identification (for example	First name		First name
	your driver's license or passport).	Bernard		
	,	Middle name		Middle name
	Bring your picture	Baker		
	identification to your meeting with the trustee.	Last name		Last name
		Suffix (Sr., Jr., II, III)	:	
	1			Suffix (Sr., Jr., II, III)
witte			was was a second	
	All other names you have used in the last 8			
years		First name		First name
	Include your married or maiden names.	Middle name		Middle name
	maiden names.	*		- Additional Control of the Control
		Last name		Last name
		First name	····	
				First name
		Middle name	\	
				Middle name
		Last name	- ī	ast name
			•	out full(t
054.00¢			1	
			Official Volume Products (1)	
0	Only the last 4 digits of our Social Security	xxx - xx - <u>3</u> <u>1</u> <u>4</u> <u>1</u>		
'n	11 IPO Province de dia t		X	xx - xx
	ndividual Taxpayer	OR		R
lc	dentification number	9 xx - xx	_	
	TIN)		9	xx - xx

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 2 of 57

	Baker	0
rast Name Mid	dle Name Last Name	Case number (# known)
4 4 4 4 5 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in	t have not used any business names or	
the last 8 years Include trade names and	Business name	Business name
doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
5. Where you live		If Debtor 2 lives at a different address:
	7038 South Merrill	
	Number Street	Number Street
	Chicago IL 6	50649
	City State Z Cook	P Code City State ZIP Code
	If your mailing address is different from the	County
	above, fill it in here. Note that the court will sany notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
-CONTROL de format de montre de la manage de montre format de la control de la format de la control	City State ZIF	Code City State ZIP Code
Why you are choosing this district to file for	Check one:	Check one:
bankruptcy	Over the last 180 days before filing this petil I have lived in this district longer than in any other district.	ion, Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)
-		

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 3 of 57

Deb	itor 1 <u>Allen B. Ba</u>	ker					Case number (irr	known)
	rast Name Middle Na	ime	Last Nam	е				
Pai	rt 2: Tell the Court Abo	ut Your E	lankru	ptcy Case				
	The chapter of the Bankruptcy Code you	Check of	ne. (Foi truptcy (a brief desc Form 2010))	ription of each, . Also, go to the	see Noti	ce Required by 11 age 1 and check t	1 U.S.C. § 342(b) for Individuals Filing he appropriate box.
	are choosing to file under	Cha	pter 7					
	unuei	☐ Cha	pter 11					
		☐ Cha	pter 12					
		☐ Cha	pter 13					
8.	How you will pay the fee	loca your subi with I ne App I rec By li less	I court it c	for more de ou may pay your payme orinted addr ay the fee if for Individu nat my fee idge may, b 50% of the	etails about ho with cash, ca ent on your be ress. in installmentuals to Pay The be waived (Yout is not requofficial poverty	w you n shier's c half, you ats. If you e Filing ou may ired to, w y line that	nay pay. Typical check, or money ur attorney may u choose this or Fee in Installme request this optwaive your fee, at applies to you	eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check office, sign and attach the ents (Official Form 103A). It is nonly if you are filing for Chapter 7, and may do so only if your income is ar family size and you are unable to nust fill out the Application to Have the
- 1	Have you filed for bankruptcy within the last 8 years?	☑ No	District District		•	When	MM / DD / YYYY	Case number
			District			When	MM / DD / YYYY	Case number
1	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with	☑ No □ Yes.	Debtor					Relationship to you
,	you, or by a business partner, or by an				***************************************		MM / DD / YYYY	Case number, if known
		s extensivaçõe des repaisor	Debtor					Relationship to you
			District			When	MM / DD / YYYY	Case number, if known
	Oo you rent your residence?	☐ No. ☑ Yes.	☑ No.	ur landlord o . Go to line 1 s. Fill out <i>Initi</i>	2.		ment against you? Eviction Judgment	Against You (Form 101A) and file it as

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 4 of 57

ebtor 1 Allen B. Ba	aker Last Name	Case number (if known)
irt 3: Report About Any	Businesses You Own as a	Sole Proprietor
Are you a sole proprietor of any full- or part-time	No. Go to Part 4.	
business?	Yes. Name and location o	of business
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as	Name of business, if an	ıy
a corporation, partnership, or LLC.	Number Street	
If you have more than one sole proprietorship, use a separate sheet and attach it		
to this petition.	City	State ZIP Code
	Check the appropriat	te box to describe your business:
	Health Care Busi	iness (as defined in 11 U.S.C. § 101(27A))
	_	al Estate (as defined in 11 U.S.C. § 101(51B))
	Stockbroker (as o	defined in 11 U.S.C. § 101(53A))
	☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
	☐ None of the above	ve
Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	any of these documents do no ✓ No. I am not filing under Chap the Bankruptcy Code.	pter 11, but I am NOT a small business debtor according to the definition in
	Bankruptcy Code.	The same and a state and a state and a state a
rt 4: Report if You Own	or Have Any Hazardous Pr	operty or Any Property That Needs Immediate Attention
Do you own or have any property that poses or is	☑ No	
alleged to pose a threat of imminent and identifiable hazard to	Yes. What is the hazard?	
Or do you own any property that needs immediate attention?		on is needed, why is it needed?
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		
	Where is the propert	ty? Number Street
		City State ZIP Code

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 5 of 57

Debtor	1	

Allen	B. Bake	Γ
Citat Name	Middle Nome	t not blome

Case number (if known)	
------------------------	--

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Debtor	1:
-------	--------	----

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l an	not	required	i to	receive	a	briefing	about
cre	dit c	ounselin	a b	ecause d	of:	:	

I have a mental illness or a mental deficiency that makes me incapable of realizing or making

rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military

duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before i filed this bankruptcy petition, but i do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

L	I am not required to receive a briefing	about
	credit counseling because of:	

credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 6 of 57

Debtor 1 Allen B. Ba		Case number (if known)					
Pá	art 6: Answer These Que	stions for Reporting Purpos	ses				
16. What kind of debts do you have? 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?		16a. Are your debts primar as "incurred by an individu ☐ No. Go to line 16b. ☐ Yes. Go to line 17. 16b. Are your debts primar money for a business or in ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you	 ✓ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. ☐ No. I am not filing under Chapter 7. Go to line 18. ✓ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and 				
		□ No □ Yes					
18.	How many creditors do you estimate that you owe?	☑ 1-49 □ 50-99 □ 100-199 □ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000	onend N.Seco		
19.	How much do you estimate your assets to be worth?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
	How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
For you		correct. If I have chosen to file under Choof title 11, United States Code. I under Chapter 7. If no attorney represents me and this document, I have obtained a I request relief in accordance with I understand making a false state.	apter 7, I am aware that I may proceed understand the relief available under and read the notice required by 11 U.S. the chapter of title 11, United States rement, concealing property, or obtaining in the state of	s Code, specified in this petition. ing money or property by fraud in connection			
		Executed on 5 08	12018 Execu	ted on MM / DD /YYYY			

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 7 of 57

or your attorney, if you are presented by one	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no						
you are not represented y an attorney, you do not eed to file this page.	knowledge after an inquiry that the information	in the schedules filed with the	e petition	n is inc	correct.		
	Signature of Attorney for Debtor	Date	MM	/ DI) /YYYY		
	Printed name						
	Firm name						
	Number Street	····					
	City	State	ZIP Cod	de			
	Contact phone	Email address	š				
	Bar number	State	-				

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 8 of 57

Debtor 1 Allen B. Bake First Name Middle Name	Last Name	Case number (# known)
For you if you are filing this bankruptcy without an attorney	The law allows you, as an individual, to represe should understand that many people find it themselves successfully. Because bankrup consequences, you are strongly urged to his	extremely difficult to represent tcy has long-term financial and legal
If you are represented by an attorney, you do not need to file this page.	To be successful, you must correctly file and hand technical, and a mistake or inaction may affect you dismissed because you did not file a required dochearing, or cooperate with the court, case trustee firm if your case is selected for audit. If that happed case, or you may lose protections, including the base of the second seco	our rights. For example, your case may be cument, pay a fee on time, attend a meeting or , U.S. trustee, bankruptcy administrator, or audit ens, you could lose your right to file another
	You must list all your property and debts in the so court. Even if you plan to pay a particular debt ou in your schedules. If you do not list a debt, the de property or properly claim it as exempt, you may also deny you a discharge of all your debts if you case, such as destroying or hiding property, falsificases are randomly audited to determine if debto Bankruptcy fraud is a serious crime; you coul	tside of your bankruptcy, you must list that debt bbt may not be discharged. If you do not list not be able to keep the property. The judge can do something dishonest in your bankruptcy ying records, or lying. Individual bankruptcy rs have been accurate, truthful, and complete.
	If you decide to file without an attorney, the court hired an attorney. The court will not treat you diffe successful, you must be familiar with the United S Bankruptcy Procedure, and the local rules of the be familiar with any state exemption laws that approximately approximately the successful of	erently because you are filing for yourself. To be States Bankruptcy Code, the Federal Rules of court in which your case is filed. You must also
	Are you aware that filing for bankruptcy is a serior consequences?	us action with long-term financial and legal
	□ No	
	☑ Yes	
	Are you aware that bankruptcy fraud is a serious inaccurate or incomplete, you could be fined or in	
	□ No	
	☑ Yes	
		an attorney to help you fill out your bankruptcy forms?
	☑ No ☐ Yes. Name of Person ☐	
	Attach Bankruptcy Petition Preparer's Notice	e, Declaration, and Signature (Official Form 119).
	By signing here, I acknowledge that I understand have read and understood this notice, and I am a attorney may cause me to lose my rights or prope	ware that filing a bankruptcy case without an
	K Aller Boker	*
•	Signature of Debtor 1	Signature of Debtor 2
	Date 5 08 20(8	Date MM / DD / YYYY
	Contact phone	Contact phone
	G-II shans (773) 732-8337	Cell phone

Email address

Email address bakerallen928@gmail.com

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 9 of 57

Debtor 1 Allen B. Baker First Name Middle Name Last Name
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Northern District of Illinois
One supplies
Case number (If known)

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$
1c. Copy line 63, Total of all property on Schedule A/B	\$2,600.00
nt 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	13 248 00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 17,827.00
Your total liabilities	\$31,075.00
rt 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,000.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$ 1,926.00

12/15

Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 10 of 57 Case 18-13452

Dε	ebtor 1	Allen B.	Baker		Ca	ase number (if known)	
		First Name	Widdle (ABWe	Last Name			
2	art 4:	Answer Th	ese Questio	ns for Administrati	ve and Statistical Records	\$	
6.	Are yo	u filing for ba	inkruptcy und	er Chapters 7, 11, or 1	3?		
	☐ No. ☑ Yes		thing to report o	on this part of the form.	Check this box and submit this f	form to the court with your ot	her schedules.
7.	What k	ind of debt d	o you have?	mattan Kost U Pramaja Konsujeli ya Salari in Kifari Makeya Jinga konfunt namasina ma			
	☑ You fam	ur debts are p nily, or househ	orimarily consi old purpose." 1	umer debts. Consume. 1 U.S.C. § 101(8). Fill o	r debts are those "incurred by an out lines 8-9g for statistical purpo	n individual primarily for a peroses. 28 U.S.C. § 159.	rsonal,
				onsumer debts. You h ther schedules.	ave nothing to report on this par	t of the form. Check this box	and submit
8.	From t Form 1	he <i>Statemen</i> 22A-1 Line 11	t of Your Curre ; OR, Form 122	ent Monthly Income: C 2B Line 11; OR , Form 1	opy your total current monthly in 22C-1 Line 14.	ncome from Official	\$2,000.00
9.		e lee we dije je	es a tal y atra da	ries of claims from Pa	urt 4, line 6 of Schedule E/F:	Total claim	
	9a. Dor	nestic support	t obligations (Co	opy line 6a.)		\$	0
	9b. Tax	es and certain	n other debts yo	ou owe the government	. (Copy line 6b.)	\$0.00	<u>0</u>
	9c. Cla	ims for death	or personal inju	ry while you were intox	icated. (Copy line 6c.)	\$0.00	<u>0</u>
	9d. Stu	dent loans. (C	opy line 6f.)			\$0.00	<u>o</u>
		igations arisin ority claims. (C		ration agreement or div	orce that you did not report as	\$0.00	<u>0</u>
	9f. Det	ots to pension	or profit-sharing	g plans, and other simil	ar debts. (Copy line 6h.)	+ \$0.00	<u>o</u>
	9g. Tot	al. Add lines §	a through 9f.	enterfasionistaninėjas ir klastas rastautoja ta		s 0.00	0

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 11 of 57

Fill in this	information to identify yo	our case and thi	s filing:		
	Allen B. Baker				
Debtor 1	First Name	Middle Name	Lust Name		
Debtor 2 (Spouse, if filin	O) First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the: No	orthern District of	Illinois		
Case numbe	r		· .	r	Check if this is ar
		<u></u>		•	amended filing
Officia	I Form 106A/B				
	dule A/B: F	Propert	v		12/15
responsib write your	le for supplying correct li name and case number (nformation. If m (if known). Ansv	ete and accurate as possible. If two ma ore space is needed, attach a separate wer every question. Land, or Other Real Estate You O	sheet to this form. On the top of a	iny additional pages
☑ No. 0	own or have any legal or Go to Part 2. Where is the property?	equitable intere	st in any residence, building, land, or s		
4.4			What is the property? Check all that ap Single-family home	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	d claims on <i>Śchedule D:</i>
1.1. <u> </u>	reet address, if available, or of	her description	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	
-			Land	\$	\$
			Investment property	Describe the nature	of your ownership
C	ty Si	ate ZIP Code	Timeshare Other	interest (such as fee	simple, tenancy by
			Who has an interest in the property		e estate), ii known.
			Debtor 1 only Debtor 2 only		
C	ounty		Debtor 1 and Debtor 2 only	Check if this is co	
			At least one of the debtors and anoth	er (see instructions)	
			Other information you wish to add a property identification number:		
If you ov	vn or have more than one,	list here:			* *
4.2			What is the property? Check all that app Single-family home	Do not deduct secured clithe amount of any secure Creditors Who Have Clair	d claims on <i>Śchedule D:</i>
1.2. Si	reet address, if available, or ot	her description	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
			Land	\$	\$
			☐ Investment property	▼	
C	sty St	ate ZIP Code	☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
			Who has an interest in the property?	•	o odate), ii kilowii.
			Debtor 1 only		
<u></u>	ounty		Debtor 2 only		
Ci	eursj		Debtor 1 and Debtor 2 only	Check if this is co	mmunity property

page 1

(see instructions)

At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 12 of 57

Debtor 1	Allen B. Bak	er	Case number (if k	(nown)	
	First Name Middl	e Name Last Name		· · · · · · · · · · · · · · · · · · ·	
1.3.	guardina de la composição		What is the property? Check all that apply. ☐ Single-family home	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
	Street address, if available	e, or other description	☐ Duplex or multi-unit building ☐ Condominium or cooperative	Current value of the entire property?	
			Manufactured or mobile home	ss proporty.	\$
			☐ Investment property	Y	,
	City	State ZIP Code	☐ Timeshare	Describe the nature of	
			☐ Other	interest (such as fee the entireties, or a life	
			Who has an interest in the property? Check one.		
			Debtor 1 only		
	County		Debtor 2 only	_	
			Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
			At least one of the debtors and another	(see instructions)	
	•		Other information you wish to add about this ite property identification number:	m, such as local	
			ll of your entries from Part 1, including any entries		\$0.0
ou own	that someone else drive	es. If you lease a vehicle	st in any vehicles, whether they are registered or re, also report it on Schedule G: Executory Contracts a		3
	•	, sport utility vehicles	, motorcycles		
U, Ne ☑ Ye	-				
		GMC	Who has an interest in the property? Check one.	San	
3.1.	Make:	***************************************	Debtor 1 only	Do not deduct secured cla the amount of any secured	d claims on Schedule D:
	Model:	Envoy	Debtor 2 only	Creditors Who Have Clain	s Secured by Property.
	Year:	2002	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:		At least one of the debtors and another	entire property?	portion you own?
	Other information:			s 1,000.00	s 1,000.00
		And the second by the second s	☐ Check if this is community property (see instructions)	\$	\$.,,
	L				e vermen en vermen en vermen en e
н уоц	own or have more than				
3.2.	Make:	Chevy	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secured	
	Model:	Corvette	Debtor 1 only	Creditors Who Have Clain	
	Year:	1996	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:		Debtor 1 and Debtor 2 only At least one of the debtors and another	entire property?	portion you own?
	Other information:		WE WE SENT OUR OF THE CENTRES STOR STORTING		2.22
	Outsi interitation.		☐ Check if this is community property (see	\$3,000.00	\$
			instructions)		
	· · · · · · · · · · · · · · · · · · ·				

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 13 of 57

Debtor 1	1 Allen B. Baker Case number (if known)								
	First Name Middle Name Last Name								
		en e	e e e e e e e e e e e e e e e e e e e	green and the control of the control					
3.3.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put					
3.3.		Debtor 1 only	the amount of any secured						
	Model:	Debtor 2 only	Creditors Who Have Claims Secured by Prope						
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the					
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?					
	Other information:								
		☐ Check if this is community property (see	\$	\$					
		instructions)							
			enty (m. tagyagyaga a a a ba	n analisa na na katawa 1990.					
3.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put					
	Model:	Debtor 1 only	the amount of any secured Creditors Who Have Claim						
		Debtor 2 only							
	Year:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?					
	Approximate mileage:	At least one of the debtors and another	onthe property.	portion you own.					
	Other information:	t	•	•					
		☐ Check if this is community property (see	\$	3					
		Instructions)							
	L								
				•					
Exam	ples: Boats, trailers, motors, personal watercr	er recreational vehicles, other vehicles, and acces aft, fishing vessels, snowmobiles, motorcycle accesso							
	ples: Boats, trailers, motors, personal watercr								
<i>Exam</i> ☑ N	ples: Boats, trailers, motors, personal watercr o es	aft, fishing vessels, snowmobiles, motorcycle accesso	ries	and a constitute Put					
<i>Exam</i> ☑ N	ples: Boats, trailers, motors, personal watercr	aft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one.	Do not deduct secured claithe amount of any secured	claims on Schedule D:					
Exam ☑ N	ples: Boats, trailers, motors, personal watercr o es	who has an interest in the property? Check one.	ries Do not deduct secured cla	claims on Schedule D:					
Exam ☑ N	ples: Boats, trailers, motors, personal watercropes Make:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured claithe amount of any secured Creditors Who Have Claim	claims on Schedule D: s Secured by Property.					
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Exam No N	ples: Boats, trailers, motors, personal wateror of the ses ses ses ses ses ses ses ses ses s	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this is community property? Check one. Check if this is community property (see instructions)	Do not deduct secured claithe amount of any secured Creditors Who Have Claim Current value of the entire property? \$	claims on Schedule D:s Secured by Property. Current value of the portion you own? \$					
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Case 18-13452 Doc 1 Desc Main

	Document	Page 14 of 57	
Allen B. Baker		Case number (if known)	

Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ₩ No ☐ Yes. Describe...... Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☑ No ☐ Yes. Describe...... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles Yes. Describe...... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☑ No Yes, Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Z No Yes. Describe...... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe...... 1,500.00 Clothes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ☑ No Yes. Describe...... 14. Any other personal and household items you did not already list, including any health aids you did not list ☑ No ☐ Yes. Give specific information...... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached 1,500.00

for Part 3. Write that number here

Debtor 1

Firet Name

ase 18-13452	Doc 1	Filed 05/08/18	Entered 05/08/18 13:37:32	Desc Ma
		Document	Page 15 of 57	

Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition 2 No 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No ☑ Yes..... Institution name: Heights Credit Union 100.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture 2 No % of ownership: Name of entity: ☐ Yes. Give specific 0% information about 0% them.....

Allen B.

Debtor 1

Baker

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 16 of 57

Debtor 1 Allen B.	Baker		
First Name	Middle Name Last	t Name	
According to the Control of the Cont			
		r negotiable and non-negotiable instruments	
Negotiable instruments Non-negotiable instrun	: include personal checks nents are those you cann	s, cashiers' checks, promissory notes, and money orders. not transfer to someone by signing or delivering them.	
☑ No			
Yes. Give specific	Issuer name:		
information about			_ \$
them	-		
			- \$ - \$
			Ψ
i. Retirement or pension	n accounts		
•		(k), 403(b), thrift savings accounts, or other pension or profit-sharing pla	ns
☑ No			
Yes. List each			
account separately	Type of account:	Institution name:	
	401(k) or similar plan: _		<u> </u>
	Pension plan:		
	IRA:		_ \$
	Retirement account:		_
	-		
	Keogh:		
	Additional account: _		<u> </u>
	Additional account:	***	_ \$
	d deposits you have mad	de so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications	
☐ Yes	Institu	ution name or individual:	
	Electric:		. c
	Gas:		- \$
	Heating oil:		φ
	-	l unit:	- a
	Prepaid rent:		· \$
	Telephone:		· \$
	Water:		· • • • • • • • • • • • • • • • • • • •
	Rented furniture:		.
			· \$
	<u></u>		
	Other:		\$
	Other:		\$
	Other:	money to you, either for life or for a number of years)	- \$ <u> </u>
₩ No	Other: or a periodic payment of r		- \$
	Other:		·
☑ No	Other: or a periodic payment of r		- \$ \$ \$

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 17 of 57

Debtor 1	Allen First Name		Baker Middle Na	ıme	Last Name	5-TV-MUNICAL MILES (1997)		Case numb	er (if known)	· · · · · · · · · · · · · · · · · · ·	
26 U.S.	ts in an ed C. §§ 530(I					qualified ABLE p	program, or u	nder a qualified	state tuition progran	 1,	
☑ No ☐ Yes		•••••		Institutior	n name and	description. Sepa	arately file the	records of any int	erests.11 U.S.C. § 52	1(c):	
										¢	
								,		– Ψ <u></u> – \$	
										\$	
exercis	equitable e able for yo			ırests in	property (o	other than anyth	ing listed in li	ne 1), and rights	or powers		
Ø No			P	nagen sylventern et der gyber sylve et e e electriq de			01	And the Collection of the Assessment or a second region or all the second or	·	****	
	. Give spec rmation abo		em							\$	
					secrets, ar	nd other intellec ds from royalties	tual property			**************************************	
	. Give spec mation abo		em	6 mm 4 Mr 4 Mr 7 mm		And the second s	All Sharrest subsections and an above and an above and an above above above and an above above above and an above and an above above above and an above an above and an above above above and an above above above above an above ab	is timberth after after that the transfer shake efficient the acceptance of the bill		\$	
				er genera	al intangible	es			essional licenses		
No											
Yes. infor	. Give spec mation abo	ific out th	em							\$	******
Money or p	property ov	wed 1	o you?							portion Do not d	nt value of the n you own? deduct secured or exemptions.
8. Tax refu	ınds owed	to y	ou								
	Give speci	ific in	formatio	n		A	and the state of t			•	
	about then	n, ind	luding w	hether	[Federal:		
	and the ta								State: Local:		
☑ No	es: Past due								ment, property settlen	nent	
Yes.	Give speci	ific in	formatio	n	as no remandado				Alimony:	¢	
					Ouganisa AAAma				Maintenance:	Φs	
					out of the same of				Support:		
									Divorce settlement:		
					and the second				Property settlement:		
0. Other ar	mounts so	meo	ne owes	s vou	Service Annual Contract of the Service Contract		00000000000000000000000000000000000000		naît		
Example	s: Unpaid v	wage	s, disabi	lity insura		ents, disability ber made to someor		vacation pay, w	orkers' compensation,		
☑ No					I						
	Give speci	fic in	formatio	n]						

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 18 of 57

Debtor 1	Allen D.	Dakei		C	Case number (if known)	·····
	First Name	Middle Name	Last Name			
v				errane e e e e e e e e e e e e e e e e e e	***************************************	
31 Interests	s in insuranc	e policies				
		•	ce; health savings a	account (HSA); credit, homeov	wner's, or renter's insurance	
☑ No						
Yes.	Name the ins	urance company	Company name:		Beneficiary:	Surrender or refund value:
	of each policy	y and list its value	Company name.		outonally.	
						<u> </u>
						\$
						\$
00 Aug : 1m4m		utu that in dua vau	from compone wh	o has diad		
If you are	e the beneficia	erty that is due you ary of a living trust, e leone has died.	xpect proceeds fron	m a life insurance policy, or are		
	Give enecifie	information				
☐ res.	Give specific	IIIIOIMation				\$
						And may Videfund a
Example	-	parties, whether or employment dispute		l a lawsuit or made a deman , or rights to sue	d for payment	
☑ No			# 1/4 M.J. m	yang ayara qarayin yila sayargan ayari kana and ama ama kana amaka ka amba ada ama ka amba Ami'ilada saka 1990 ((babb) (babb) (babb)		there was no resource to the same of the s
☐ Yes.	Describe eac	h claim				s
				\$\$\text{\$\		
34. Other co		l unliquidated clain	is of every nature,	including counterclaims of	the debtor and rights	
☑ No	ii olaiiio					
	Describe eac	h claim	·			An and a second re-
- 100.	Dodon Do odo				w. «»	\$
A. A			lint			
•	liciai assets	you did not already				
☑ No	6 7					
₩ Yes.	Give specific	information			manager and a second of the se	\$
				uding any entries for pages		100.00
for Part	4. Write that	number here			······→	\$ 100.00
				e de la companya de		
C. T. VIII-VIC STORES						
Part 5:	Describe	Anv Business-l	Related Proper	rtv You Own or Have a	an Interest In. List any	real estate in Part 1.
37. Do you c	own or have a	any legal or equitat	le interest in any t	business-related property?		
☑ No. 0	3o to Part 6.					
Yes.	Go to line 38.					
				enna mantenatik mena merancek patendak tahak sabark terde		Current value of the
						portion you own?
						Do not deduct secured claims or exemptions.
						or exemptions.
38. Account	s receivable	or commissions yo	u already earned			
☑ No		o ya ngayani' ayini kunug ngali nginiganina diya man dimidira din kumuri mik di daririyani kwilin girini ari k				annance to any
Yes.	Describe					· ·
	V Administra A 1					P
		rnishings, and supp				
Examples	: Business-relat	ed computers, software	, modems, printers, co	opiers, fax machines, rugs, telepho	ones, desks, chairs, electronic devic	ces
No			rografiyoogoyyoogogaanaaayaanaa amaa aa	лиму таку у года 1989. У текнову булайн айлайнаан бүйлөөг багаа найга аан заниш алгаа га аан заниш үүү га га а	PANER IN THE WAR AND AND A THE PROPERTY OF THE WAR AND A SECOND ASSESSMENT OF THE SECOND ASSESSM	in the section of the
Yes.	Describe					\$
	1			- M-1000MAN. 1000-100-100-100-100-100-100-100-100-10		

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 19 of 57

Debtor 1	Allen B.	Baker		C	ase number (if known)	
	First Name	Middle Name	Last Name			***************************************
40. Machir	nery, fixtures, e	quipment, sup	plies you use in bu	siness, and tools of your trade		
☑ No						
	s. Describe	//www.n.n.m.m.m.m.m.m.m.m.m.m.m.m.m.m.m.m.	**************************************		description has the Market Anna Commission of the Anna Anna Anna Anna Anna Anna Anna Ann	· · · · · · · · · · · · · · · · · · ·
 16:	s. Describe					\$
	i.					
41. Invento	orv					
☑ No						
☐ Ye	s. Describe					S
	armana.					
		ips or joint ven	tures			
₩ No						
∟ Ye	s. Describe	Name of entity:			% of ownership:	
					%	\$
		-		·	%	\$
					%	\$
		-				V
43. Custon	ner lists, mailir	ng lists, or othe	r compilations			
₩ No		· • · · · · · · · · · · · · · · · · · ·				
☐ Yes	s. Do your lists	include persor	nally identifiable inf	ormation (as defined in 11 U.S.C	C. § 101(41A))?	
	□ No	•	•	•	· , ,,	
	Yes. Desc		4.00 mm/	/ / Add das Warshid Amerika a mahamman (Mashers') 12 Washis Vashis Amerika Amerika a santan ilama a minama min		V-V-1000
	, 00. 5000	and the same of th				\$
		Money to consider and the service of the			ed server manywring transfer a minigan and de fer frank mus taket dade taket taket to the transfer to the tran	N MATERIAL PROPERTY AND ADMINISTRATION OF THE PROPE
44. Any bu	siness-related	property you d	id not already list			
₩ No						
	s. Give specific					\$
info	rmation		······································		***************************************	_
						\$
		***************************************	****		 	\$
						\$
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45 Add th	e dollar value o	of all of vour en	tries from Part 5. In	cluding any entries for pages y	you have attached	s 0.00
		_				\$
And property of the activities and		ran in the second secon	er in the Committee of	AND THE PROPERTY OF THE PROPER	The second section of the contract of the cont	
D C .			O	store Madadad Rosesands Vari	Dun au Hana au Intara 1	l
Part 6:	If you own or	n y rarm- ano r have an intere	st in farmland, list i	ning-Related Property You (it in Part 1.	Jwn or nave an interest i	IR.
	,				 	
46 Do vou	own or have a	ny lonal or onu	itahla intaraet in an	y farm- or commercial fishing-	related property?	
	Go to Part 7.	my legal of equ	itabie miterest in th	y taliii- or commortial normig-	related property i	
	Go to line 47.					
	. 00 (0 1110 17.					
						Current value of the portion you own?
						Do not deduct secured claims
						or exemptions.
47. Farm a						
	les: Livestock, p	oultry, farm-raise	ed fish			
Mo No						
Yes	·	a anticologica de la como esta a la compositiva de la compositiva de la compositiva de la compositiva de la co	**************************************		Statistical Action of a serious and Assessing Astronomy	- Allerian
	OMERSON I DESIGNATION OF THE PROPERTY OF THE P					· ·
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Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 20 of 57

First Name Middle Name Last Name 48. Crops—either growing or harvested		
7 1 No.		
	The state of the s	
Yes. Give specific information	\$	
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade		
☑ No □ Yes		
	\$	
50. Farm and fishing supplies, chemicals, and feed		
☑ No ☐ Yes		
Lai Yes	\$	
51. Any farm- and commercial fishing-related property you did not already list	_	
☐ Yes. Give specific		
information	\$	
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$	0.00
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above		
53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership		
☑ No	\$	
Yes. Give specific information	\$	
	Ψ	
	\$	
	\$	0.00
54. Add the dollar value of all of your entries from Part 7. Write that number here	\$	0.00
54 Add the dollar value of all of your entries from Part 7. Write that number here	\$	0.00
54 Add the dollar value of all of your entries from Part 7. Write that number here		0.00
54. Add the dollar value of all of your entries from Part 7. Write that number here		
54. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2		
54. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 56. Part 2: Total vehicles, line 5 \$ 1,000.00		
Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 \$ 1,000.00		
Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36		
Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45		
Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2	50	00
Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45 60. Part 6: Total farm- and fishing-related property, line 52 51. Part 7: Total other property not listed, line 54	50	0.00

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 21 of 57

Fill in this inform	ation to	identify y	our case:		2420 mm	
Debtor 1 Alle	n B.	Baker				
First I	lame		Middle Name	Last Name		
(Spouse, if filing) First I	łame		Middle Name	Last Name		
United States Bankr	uptcy Cou	irt for the: N	orthern Distri	ct of Illinois		
Case number (If known)						Check if this is a amended filing
Official For	ლ 1∩	െ				
			e Prop	erty You	Claim as Exemp	t 04/16
					together, both are equally responsible for	
Using the property	ou listed out and	i on <i>Sched</i> attach to t	<i>lule A/B: Prop</i> his page as n	perty (Official Form 10	6A/B) as your source, list the property that Additional Page as necessary. On the top	you claim as exempt. If more
•		•			amount of the examption you plain O	no way of dains on in to atata a
specific dollar amo	ount as	exempt. A	lternatively,	you may claim the fi	amount of the exemption you claim. O ull fair market value of the property beir	ig exempted up to the amount
					or health aids, rights to receive certain u claim an exemption of 100% of fair m	
	on to a p	articular o	iollar amour	nt and the value of th	e property is determined to exceed that	
would be illilled to	o trie ap	bilicania 21	atutory airio	un.		
Part 1: Ident	ify the	Property	You Claim	as Exempt		
d likelink out of a			Caelmiete	Charle and only over	if your spouse is filing with you.	
	· ·	· ·	·	cruptcy exemptions. 1		
_	_			.S.C. § 522(b)(2)	1 0.0.0. 3 0(0)(0)	
2. For any prope	rty you	list on Scl	nedule A/B tl	nat you claim as exe	mpt, fill in the information below.	
Brief descript Schedule A/B				Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
				Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:	Auto	mobile		\$ 1,000.00	□ \$ 1,000.00	735 ILCS 5/12-1001(c)
Line from	0.4				100% of fair market value, up to	
Schedule A/B:	3.1	_			any applicable statutory limit	
Brief	Auto	mobile		\$ 0.00	\$ 2,400.00	735 ILCS 5/12-1001(c)
description: Line from				Andri de de servicio de se	100% of fair market value, up to	urapauran merenanna era era era era era era era era era er
Schedule A/B.	3.2	-			any applicable statutory limit	
Brief description:	Clot	nes		\$ <u>1,500.00</u>	\$ <u>1,500.00</u>	735 ILCS 5/12-1001(a)
Line from Schedule A/B:	11	_			100% of fair market value, up to any applicable statutory limit	
2 - A	inu a ba	mantand .		i mara than \$160 276	:9	
•	-		•	f more than \$160,375 years after that for ca	or ses filed on or after the date of adjustment	.)
☑ No			•		·	
-	ou acquii	e the prop	erty covered	by the exemption with	in 1,215 days before you filed this case?	
☐ No ☐ Yes						

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 22 of 57

Debtor 1

Allen	B. Baker		Case number (if known)
First Name	Middle Name	Last Name	

Part 2: Additional Page

	on of the property and line /B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description:	Checking Account	\$100.00	3 \$ 100.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B.	<u>17.1</u>		100% of fair market value, up to any applicable statutory limit	
Brief description:	**************************************	\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:	All and All an		any applicable statutory limit	
Brief description: Line from		\$	\$ 100% of fair market value, up to	
Schedule A/B:	Canada Ca		any applicable statutory limit	
Brief description:		\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:	····		any applicable statutory limit	
Brief description:		\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description: Line from		\$	□ \$ □ 100% of fair market value, up to	:
Schedule A/B:			any applicable statutory limit	
Brief description:		\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description: Line from		\$	\$ \$ 100% of fair market value, up to	
Schedule A/B:			any applicable statutory limit	<u> </u>
Brief description:		\$	\$ \$ to to	
Line from Schedule A/B:			any applicable statutory limit	Western

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 23 of 57

Fill in this information to identify your cas	e:			
Debter 1 Allen B. Baker	The Control of the Co			
First Name Middle N	ame Last Name			
Debtor 2 (Spouse, if filing) First Name Middle N	ame Last Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number(if known)			☐ Check	c if this is an
(II KEDWI)				ded filing
Official Form 106D				
Official Form 106D	. Whe Have Claims Secure	ad by Draw	a material	
	s Who Have Claims Secur			12/15
information. If more space is needed, copy	If two married people are filing together, both are en the Additional Page, fill it out, number the entries,	tually responsible to and attach it to this	or supplying corre form. On the top (ect of any
additional pages, write your name and cas	e number (if known).			
1. Do any creditors have claims secured by				
 No. Check this box and submit this form ✓ Yes. Fill in all of the information below. 	n to the court with your other schedules. You have noth	ng else to report on t	his form.	
Yes. Fill in all of the information below.				
Part 1: List All Secured Claims				
6. Link all programs delaims. If a graditor has m	pero then one accurated plain. List the graditar constrately	Column A	Column B	Column C
for each claim. If more than one creditor ha	ore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2.	Amount of claim Do not deduct the	Value of collatera that supports this	
As much as possible, list the claims in alph	abetical order according to the creditor's name.	value of collateral.	claim	Ifany
2.1 Nationwide Cassel LLC	Describe the property that secures the claim:	\$10,548.00	\$3,000.00	0.00
Creditor's Name 3435 N Cicero Ave	Automobile			
Number Street				
	As of the date you file, the claim is: Check all that apply. Contingent			
Chicago IL 60641	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	_		
community debt Date debt was incurred 05/01/0201	Last 4 digits of account number 3 1 4 1			
2.2 TitleMax Title Loans	Describe the property that secures the claim:	s 2,700.00	s 2,700.00) _s 0.00
Creditor's Name		7	V	V
9540 S. Cicero Ave	Automobile - 2002 GMC Envoy			
Number Street	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
Oak Lawn IL 60453 City State ZIP Code	Unliquidated			
Who owes the debt? Check one.	Disputed			
Debtor 1 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's fien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	_		
Check if this claim relates to a community debt				
Date debt was incurred 05/01/2018	Last 4 digits of account number 3 1 4 1	d hij polyticznych w moneum wyt kontitolyt i w War kolonia kolonia je przez pojawy dan nie ma kontitolyt	Commence of the Commence of th	rs Decramaties decramations de accompany de contract est la con-
Add the deller value of your entries in C	'alumn A on this ness Mirita that number here.	k 13.248.00	ı	

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 24 of 57

Debtor 1 Allen B. Baker First Name Middle Name	Last Name Case nui	nber (if known)	······································	······································
Additional Page		Column A	Column B	Column C
Part 1: After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecured portion If any
	Describe the property that secures the claim:	. \$	\$	\$
Creditor's Name				
Number Street	-			
	As of the date you file, the claim is: Check all that apply.	J		
City State ZiP Code	Contingent Unliquidated			
CRY State El-Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 2 only Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	-		
community debt	•			
Date debt was incurred	Last 4 digits of account number	S Aller Turnel Antion 22-15 the order than 16 the state of the state o	a Johalima Gradin shadan shadan sharan sayan sayan sayan sayan sharan saya falin sharan sayan sayan sayan saya	emphodesic followers of the second
	Describe the property that secures the claim:	\$	\$:	\$
Creditor's Name				
Number Street		_		
	As of the date you file, the claim is: Check all that apply.			
	Contingent Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan)			
At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	<u>.</u>		
community debt				
Date debt was incurred	Last 4 digits of account number			
Procedure of the contract of t	Describe the property that secures the claim:	S	\$	muse Annount Annount Annount war de Contident Anno
Creditor's Name]		
Number Street	-			
	- As of the date you file, the claim is: Check all that apply.			•
	☐ Contingent			***,*** ***** **** ************
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	·•		
community debt Date debt was incurred	Last 4 digits of account number			
		0.00		
Approximation and the second s	s in Column A on this page. Write that number here:	<u> </u>		
If this is the last page of your form	, add the dollar value totals from all pages.	_{\$} 13,248.00		

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 25 of 57

Debto	r1 '	Allen	В.	Baker					Case number (# known)
	-	First Name		Middle Name		ast Name	4 Th - 1 Va.		
	rt 2:						t That You		
ag	ency is to o have m	rying to o	collec	t from you creditor fo	for a debt rany of the	you owe : e debts th	to someone (else, list the in Part 1, li	a debt that you already listed in Part 1. For example, if a collection excreditor in Part 1, and then list the collection agency here. Similarly, if st the additional creditors here. If you do not have additional persons to
									On which line in Part 1 did you enter the creditor?
	Name	***************************************							Last 4 digits of account number
	Number	Stre							
	MOUNDER	Sue	:61						
					**-				•
	City			~ <u>~~~~~~~~~~~~~~</u>		State	ZIP C	ode	
П	egyppy ydrynod soddiodddio	2012/0010/0010/0010/00/0010/00/00/00/00/00/0	eetmuskisk()-k	0d9/55/54/030967F04607D	eto en esta de la constanta de	etinjirokta timbada etindiktolo	and a second contrast of the second	entropy of the second s	On which line in Part 1 did you enter the creditor?
لـــا	Name								Last 4 digits of account number
	1401110								
	Number	Stre	et						•
								~~····································	
	City			edile A. os assessi i suscepto punticido de la	ation Shell or windows of Debates of the	State	ZIP C		indications of the control of the co
	TOTAL CONTRACTOR OF THE PARTY O								On which line in Part 1 did you enter the creditor?
	Name								Last 4 digits of account number
	Number	Stre	et						
	*******						·	· · · · · · · · · · · · · · · · · · ·	
	City					State	ZIP C	ode	•
	han sanasakunist esi	373346460A3808A8A		pertorgenous en missive co	activate property accessory			TOTAL POLICE PARTY OF THE PARTY	On which line in Part 1 did you enter the creditor?
	Name								Last 4 digits of account number 3 1 4 1
	Hans								
	Number	Stre	eet						•
									•
	City	ecabytanapys on General Pro-	in-qui an ii	nggakin maida pro perpopus, edileksi ketal	المراجعة المراجعة والمراجعة والمراجع	State	ZIP C	ode	大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大大
									On which line in Part 1 did you enter the creditor?
	Name				· · · · · · · · · · · · · · · · · · ·				Last 4 digits of account number
1 V	Al								
:	Number	Stre	eet						
	***************************************								-
	City					State	ZIP C	ode	-
		garyyganakobiskiskib	www.co.rea	est opposition (2005-0000-0000)	n in de la company de la compa	g Sagong (Tiggy Chillian State S S S S S S S S S S S S S S S S S S S	and the second and respectively and the second and	yya maad digad ahaa ahaa ahaa ahaa ahaa ahaa ahaa a	On which line in Part 1 did you enter the creditor?
<u></u>	Name								Last 4 digits of account number
	i valific								-
	Number	Str	eet						-
									-
									· -
	City			························		State	ZIP C	ode	

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 26 of 57

Debtor 1	Allen	В	Baker	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the	: Northern District of Illinois		
Case number				

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

1	Do any creditors have priority unsecured claim				
	No. Go to Part 2.	is against you?			
	Yes.				
	Tes.	reditor has more than one priority unsecured claim, list t	AND ENGINEERING AND AND AND	a salahan kacamatan	
2.	nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of	reditor has more than one priority unsecured claim, list to f a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's no Part 1. If more than one creditor holds a particular claim instructions for this form in the instruction booklet.)	at claim here a	nd show both	priority and
	1		Total claim	Priority amount	Nonpriority amount
2.1			_		
****	Priority Creditor's Name	Last 4 digits of account number	\$	_ \$	\$
		When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply	ı		
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	— Diopates			
	Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were			
	Is the claim subject to offset?	intoxicated			
	☐ No	Other. Specify			
	☐ Yes				
2.2		Last 4 digits of account number			CONTRACTOR OF THE PROPERTY OF
	Priority Creditor's Name		\$. \$	_ \$
		When was the debt incurred?			
	Number Street	An of the date year file the eleteries in Charle Wiles			
		As of the date you file, the claim is: Check all that apply			
		☐ Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury white you were			
	☐ Check if this claim is for a community debt	intoxicated			
	Is the claim subject to offset?	Other. Specify			
	☐ No				
	Yes				

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 27 of 57

Allen Baker_ Debtor 1 Case number (if known)_ Last Name

	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprie amount
	Last 4 digits of account number	\$	\$	
Priority Creditor's Name		V	- Ψ	Φ
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who incurred the debt? Check one.	- Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
s the claim subject to offset?	Other. Specify			
☐ No				
Yes				Market No.
	Last 4 digits of account number	\$	\$	\$
riority Creditor's Name				
umber Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
ity State ZIP Code	☐ Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 1 only Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify			
s the claim subject to offset?				
☐ No ☐ Yes				
J YES Budd-nythreshamilanahmanaminanananananananananananananananana			ayaayaaca maasaa maalaan ahaa ahaa ahaa ahaa ahaa ahaa aha	TO SENSO
riority Creditor's Name	Last 4 digits of account number	\$	\$	\$
umber Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
ity State ZIP Code	Unitiquidated			
/ho incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtar 2 only	_			
Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify	notestalaise provinteliminen punistiisten taavase	m dy same a same trade and	annihit Manamania
the claim subject to offset?				
) No				

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 28 of 57

Dehtor	1	

Allen

Allen

Baker

Case number (if known)_

1500	Do any creditors have nonpriority ur							
	No. You have nothing to report in the	nis part. Su	bmit this form to the	ne court with your other schedules.				
14.54	Yes	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
4.		ditor holds		order of the creditor who holds each claim. If a creditor ham. For each claim listed, identify what type of claim it is. Do no list the other creditors in Part 3.If you have more than three n				
	7		and the second second second second	a an marana ng mga mga mga mga mga mga mga mga mga mg	To	tal claim		
1.1	Sullivan Urgent Aid Centers Lt			Last 4 digits of account number 3 6 0 2	N-MILESCHILL			
	Nonpriority Creditor's Name				\$	406.00		
	Po Box 87844			When was the debt incurred? 06/01/2014				
	Number Street Carol Stream	11	00400	_				
	City	State	60188 ZIP Code	An of the data way file the all the annual file				
		State	ZIP Code	As of the date you file, the claim is: Check all that apply.				
	Who incurred the debt? Check one.			Contingent				
	Debtor 1 only			Unliquidated				
	Debtor 2 only			☐ Disputed				
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another							
				Student loans Obligations arising out of a separation agreement or divorce.				
	Check if this claim is for a commun	nity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	s			
	No No			☑ Other, Specify Medical				
	☐ Yes							
2	Little Company Of Mary Hospit	al	and the second s	Last 4 digits of account number 6 3 6 2	\$	3,544.00		
	Nonpriority Creditor's Name	···		When was the debt incurred? 12/01/2016	Φ	0,011.00		
	2800 W 95TH Street			Which was the dept mounted:				
	Number Street							
	Evergreen Park	IL	60805	As of the date you file, the claim is: Check all that apply.				
	City	State	ZIP Code	☐ Contingent				
	Who incurred the debt? Check one.			Unliquidated				
	Debtor 1 only			Disputed				
	Debtor 2 only							
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another			☐ Student loans				
	☐ Check if this claim is for a commun	ity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	,			
	☑ No			☑ Other Specify Hospital				
	☐ Yes							
3	OneMain	richinish x chessive extravere arcasistic 22	THE CANADIST CONTROL OF STREET AND ASSESSMENT ASSESSMENT OF THE PROPERTY OF TH		AMARIA (Employable)	***************************************		
	Nonpriority Creditor's Name			Last 4 digits of account number 7 4 9 1	\$	2,113.00		
	Po Box 1010			When was the debt incurred? 05/01/2017				
	Number Street							
	Evansville	IN	47706	As of the date you file, the claim is: Check all that apply.				
	City	State	ZIP Code			1		
	Who incurred the debt? Check one.			Contingent		Pro-		
	Debtor 1 only			Unliquidated		A Section A		
	Debtor 2 only			☐ Disputed		1		
	Debtor 1 and Debtor 2 only			Tune of NONDRIGHTY was a sound a later				
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:		o common o		
	Check if this claim is for a communi	ity deht		Student loans		La Million Conce		
		y uout		Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts				
	Yes			Other Specify Loan				

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 29 of 57

Debtor 1

Alle	en	
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Baker

Case number (if known)__

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Your NONPRIORITY Unsecured Claims — Continuation Page

Credit One Bank Na			Last 4 digits of account number 4 7 9 6	s 6
Nonpriority Creditor's Name Po Box 98875			When was the debt incurred? 12/01/2016	Ψ
Number Street Las Vegas	An /	00400	As of the date you file, the claim is: Check all that apply.	
City	NV State	89193 ZIP Code	Contingent	
Who incurred the debt? Check Debtor 1 only	one.	_: 	Unliquidated Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and	another		Student loans	
☐ Check if this claim is for a set the claim subject to offset? ✓ No ☐ Yes	community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card 	
First Premier Bank	reaction follows the macroscope of the college of the following the college of th	man 4,3 mm erfort stock of the stable land and the summer land of the stable land and the stable land of the	Last 4 digits of account number 7 8 0 0	\$ <u>59</u>
Nonpriority Creditor's Name 501 S Minnesota Ave		· · · · · · · · · · · · · · · · · · ·	When was the debt incurred? 02/01/2017	
Jumber Street			- Constitution of the cons	
Sioux Falls	SD	57104	As of the date you file, the claim is: Check all that apply.	
Xity	State	ZIP Code	Contingent	
Who incurred the debt? Check	one.		☐ Unliquidated ☐ Disputed	
Debtor 1 only			Ca Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and	another		Student loans	
_			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a c	ommunity debt		Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset? No			☑ Other Specify Bank	
Yes	processing and a programmy depicting stops for the size of the siz		Last 4 digits of account number 3 1 4 1	_{\$} 1,70
Chase on priority Creditor's Name				
Po Box 15298			When was the debt incurred? 05/01/2018	es na appoins o nova levy a
umber Street Vilmington	DE	19850	As of the date you file, the claim is: Check all that apply.	
ity	State	ZIP Code	Contingent	
/ho incurred the debt? Check of	ine.		Unliquidated	
Debtor 1 only	re roots		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and a	another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a c	ommunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset? No			Other. Specify Bank	

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 30 of 57

er_

Debtor 1

len		В	Bake
st Name	Middle Name	l get Mama	

Case number (if known)

Your NONPRIORITY Unsecured Claims — Continuation Page

Nonpriority Creditor's Name 7531 S Stony Island Ave Number Street Chicago IL 60649 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt sthe claim subject to offset? No Yes	When was the debt incurred? O5/01/2018 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Hospital Bill Last 4 digits of account number 3 1 4 1 When was the debt incurred? 05/01/2018	\$ <u>2,70</u>
Number Street Chicago IL 60649 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt sthe claim subject to offset? No Yes	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Hospital Bill	\$ <u>2,70</u>
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt sthe claim subject to offset? No Yes	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Hospital Bill	\$ <u>2,70</u>
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt s the claim subject to offset? No Yes	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Hospital Bill	\$ <u>2,70</u>
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt s the claim subject to offset? No Yes	□ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Hospital Bill	\$ <u>2,70</u>
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt s the claim subject to offset? No Yes	□ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Hospital Bill	\$ <u>2,70</u>
☐ Check if this claim is for a community debt s the claim subject to offset? ☑ No ☐ Yes	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Hospital Bill Last 4 digits of account number 3 1 4 1	\$ <u>2,70</u>
s the claim subject to offset? No Yes	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Hospital Bill Last 4 digits of account number 3 1 4 1	\$_2,70
raalis Hospital		\$ <u>2,70</u>
onpriority Creditor's Name	When was the debt incurred 2 05/01/2018	
One Ingalls Drive		
^{umber} Street Harvey IL 60426	As of the date you file, the claim is: Check all that apply.	
ity State ZIP Code	☐ Contingent	
How because I the above to	Unliquidated	
/ho incurred the debt? Check one.	Disputed	
₫ Debtor 1 only Debtor 2 only	T (MONDO In	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	Other, Specify Hospital Bill	
¶ No IYes		
		s 3,90
city Of Chicago Department Of Finance	Last 4 digits of account number 3 1 4 1	T
o Box 4641 Imber Street	When was the debt incurred? 05/01/2018	
hicago IL 60680	As of the date you file, the claim is: Check all that apply.	
ly State ZIP Code	Contingent	
ho incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Student toansObligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
No	Other. Specify Tickets	

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 31 of 57

Debtor 1

Baker

 ien		В
st Name	Middle Name	

Case number (if known)__

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Peoples Gas			Last 4 digits of account number 3 1 4 1	s 20
Nonpriority Creditor's Name 200 E Randolph St			When was the debt incurred? 05/01/2018	\$
Number Street Chicago	IL	60601	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Che Debtor 1 only	State	ZIP Code	☐ Contingent ☐ Unfiquidated ☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 onlyAt least one of the debtors a	nd another		Student loans	
☐ Check if this claim is for is the claim subject to offset	a community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Utilities 	
☑ No □ Yes			Other. Specify Othlines	
Secretary Of State		ang ocupa amandi na dengalah ya pangarang sengaran ang mangarang da Palah	Last 4 digits of account number 3 1 4 1	S
Nonpriority Creditor's Name 2701 S Dirksen Parkwa	av		When was the debt incurred? 05/01/2018	Ψ
Number Street Springfield	IL	62723	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	☐ Contingent	
Who incurred the debt? Chec	k one.		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors an			☐ Student loans	
			Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a s the claim subject to offset?			you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
☑ No ☑ Yes	•		other. Specify Notice Only	
America's Financial Ch		- Mindelland hold hold hold hold an 	Last 4 digits of account number 3 1 4 1	\$1,800
onpriority Creditor's Name 0302 S Halsted St	Olce		When was the debt incurred? 05/01/2018	
umber Street Chicago		60628	As of the date you file, the claim is: Check all that apply.	
ity	~~	ZIP Code	Contingent	
Vho incurred the debt? Check	cone.		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and Check if this claim is for a			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	-		Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset? No			Other. Specify Loans	
) Yes				

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 32 of 57

Debtor 1

Allen

Middle Name

В

Baker

Case number (if known)

Part 3:	List Others	ia Ra	المفاقا مط	About -	B - 1-4				
		-0 20	HOLLING	About a	nept	i hat	You.	Already	Lister

Ars Account Resolution)		ve more than one creditor for any of the debts that you listed in Parts 1 or 2, list the sons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor?
1643 NW 136 Ave Bld	H St		Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Sunrise	FL.	33323	Last 4 digits of account number 3 6 0 2
City	State	ZIP Code	
Merchants Credit Guide			On which entry in Part 1 or Part 2 did you list the original creditor?
223 W Jackson Blvd St	e 7		Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Claims Part 2: Creditors with Nonpriority Unsecured
Chicago ^{City}	IL State	60606 ZIP Code	Last 4 digits of account number 6 3 6 2
		and the second s	On which entry in Part 1 or Part 2 did you list the original creditor?
Vame			
vumber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Olicet			Claims Part 2: Creditors with Nonpriority Unsecured
City Commission of the American Commission of the Commission of th	State	ZIP Code	Last 4 digits of account number
iame			On which entry in Part 1 or Part 2 did you list the original creditor?
AGINE			
Jumber Street		And the second s	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
City	State		Last 4 digits of account number
et tysker og de sykretering et en militet trigette et en trefte flerte fra folksig der ausbergebilde til en tr De ser tilste gestere det sinde et en militet trigette et en trefte flerte flerte de de ausbergebilde til en t	State	ZIP Code	
ame			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street			Claims
ity	State	ZIP Code	Last 4 digits of account number
		44.2 (A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	On which entry in Part 1 or Part 2 did you list the original creditor?
ame			on which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street	***************************************		Part 2: Creditors with Nonpriority Unsecured
			Claims
ity	State	ZIP Code	Last 4 digits of account number
ame			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
ımber Street			Part 2: Creditors with Nonpriority Unsecured Claims
ty	State	ZIP Code	Last 4 digits of account number

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 33 of 57

Debtor 1

First Name

В

Case number (# known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$ 0.00
Irom Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	s 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00
el delle sel			Total claim
Total claims	6f. Student loans	6f.	s 0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. -	+ \$ 17,827.00
	Sj. Total . Add lines 6f through 6i.	6j.	s17,827.00

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 34 of 57

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	l in this ir	niorma	tion to	identify y	our ca	ise:													
De	ebtor	Allen First Nar		Baker	Middle	Name	L	ast Name											
	btor 2 ouse if filing)	First Nar	ne		Middle	Name	Ł	ast Name		 -									
Un	ited States	Bankrup	tcy Co	urt for the: N	lorther	District of I	llinois												
	se number															<u> </u>	1 04	to to all to the c	
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2.1	Person o				you h	ave the con	tract or i				State wh		17.00	ct or i	ase is	for			
	Name																		
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1	City		···········	S	ate	ZIP Code													
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and the same of	Number	Stre	et		· · · ·		,												
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	Number	Stre	et																
	City			St	ate	ZIP Code													

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 35 of 57

Debte	or 1	Allen B.	Baker		Case number (if known)	
		First Name	Middle Name	Łast Name		
		Additional	Page if You H	ave More Contracts or Leas	ses	
	Doreon	or compan	v with whom you	ı have the contract or lease	What the contract or lease is for	
	FEISOII	or compan	y with whom you	I make the contract of lease	AMINE THE COURTSC! OF 18456 18 101	
22						
	Name			· · · · · · · · · · · · · · · · · · ·		
	Number	Street				
				***************************************	·	
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	City	paga et sjargene gjelje erike ar teatye og gjargereg	State	ZIP Code ***********************************	arrigamente (fotorem nor o to the second annual frame, National Hans, National Ha	Elementhold traductions at latertaines strange and str
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	Name		***************************************	***************************************		
	Number	Street	·····			,
		0001				
	City		State	ZIP Code		
2	-10 <u></u>	-construction of the second	a Periode, Principal Participation (control of violence) and an included an included an included and an included an included and included an included and included an included an included an included and included an include	м. ж. үүчү ж.	render framework framework of the state of t	-төм үүлөл үлхийн үс үсүнүн түүрүн Фүүлэн бүүл бай, бай, бай байдан байбан жаншаууча аваб
	Name					

	Number	Street				
	City		State	ZIP Code		
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	Name		*** * * * * * * * * * * * * * * * * * *			
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	City		State	ZIP Code		
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Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 36 of 57

Debtor 1	Allen B. Bal	ker		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse, if filing)	First Name	Middle Name	Last Name	
Instant Chakes C				
United States E	sankruptcy Court for	the: Northern District of II	inois	
Case number	enkruptcy Court for	the: Northern District of it	inois	D object or
United States E Case number (If known)	Sankruptcy Court for	the: Northern District of II	nois	☐ Check if amende

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

Do you l	have any codebtors? (If you are filing a joint case, do not list eit	ner spouse as a codebtor.)	
☐ Yes			
Within t Arizona,	the last 8 years, have you lived in a community property state, , California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico,	or territory? (Community property states and territories include Texas, Washington, and Wisconsin.)	
2 No. 0	Go to line 3.		
☐ Yes.	Did your spouse, former spouse, or legal equivalent live with you	at the time?	
<u> </u>			
U 1	Yes. In which community state or territory did you live?	Fill in the name and current address of that person.	
i	Name of your spouse, former spouse, or legal equivalent		
i	Number Street		
;	City State	ZIP Code	
		5444	
shown i Schedui	in line 2 again as a codebtor only if that person is a guaranto le D (Official Form 106D), Schedule E/F (Official Form 106E/F) le E/F, or Schedule G to fill out Column 2.		
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Official Form 106H

Schedule H: Your Codebtors

page 1 of ____

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 37 of 57

Debtor 1	Allen B. Baker First Name Middle Name Last Name	Case number (if known)
	Last terms	
	Additional Page to List More Codebtors	S
Colum	n 1: Your codebtor	Column 2: The creditor to whom you owe the debt
- -		Check all schedules that apply:
Name		Schedule D, line
1101110		☐ Schedule E/F, line
Numbe	er Street	□ Schedule G, line
City	State	ZIP Code
_		
Name		Schedule D, line
		Schedule E/F, line
Numbe	er Street	Schedule G, line
City	State	ZIP Code
-		Schedule D, line
Name		Schedule E/F, line
Numbe	r Street	Schedule G, line
140/1100	Jueec .	
City	State	ZIP Code
		Schedule D, line
Name		Schedule E/F, line
Numbe	r Street	☐ Schedule G, line
City	Slate	ZIP Code
-		Name of the state
Name		Schedule D, line
		☐ Schedule E/F, line
Number	r Street	Schedule G, line
City	State	ZIP Code
		Schedule D, line
Name		☐ Schedule E/F, line
Number	Street	□ Schedule G, line

City	State	ZiP Code
Name		Schedule D, line
		☐ Schedule E/F, line
Number	Street	Schedule G, line
City	State	ZIP Code
]		
Name		Schedule D, line
		Schedule E/F, line
Number	Street	Schedule G, line
City	State	ZiP Code

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 38 of 57

Fill in this information to identify	your case:					
Debtor 1 Allen B. Baker						,
First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:	Northern District of Illinois					
Case number				Check if th	nis is:	
(If known)					ended filing	
					element showing post as of the following o	
Official Form 106l	•			MM / D	D/ YYYY	
Schedule I: You	ır Income					12/15
Be as complete and accurate as posupplying correct information. If you figure separated and your spouseparate sheet to this form. On the	ou are married and not filin use is not filing with you, d top of any additional page	ig jointly, and you o not include info	ur spouse is ormation ab	s living with y out your spot	ou, include informatio use. If more space is n	n about your spouse. eeded, attach a
Fill in your employment information.		Debtor 1	1000	territoria. Personal	Debtor 2 or non-fi	lina spouse
Information. If you have more than one job,		MANAGEMENT CONTRACTOR		######################################		
attach a separate page with information about additional employers.	Employment status	☑ Employed☑ Not employed	ed .		Employed Not employed	
Include part-time, seasonal, or		,			, ,	
self-employed work.	Occupation	Operator				
Occupation may include student or homemaker, if it applies.	·	Ford Motor C	•			
	Employer's name	Ford Motor C	<u> </u>		\$1000000000000000000000000000000000000	
	Employer's address	12700 S. Torr	ence Ave	;		
		Number Street			Number Street	
:						····
:					**************************************	
· ·		Chicago	IL 715	60633	C.h.	State ZID Code
1		City	State ZIP	Code	City	State ZIP Code
	How long employed there	9? <u>6yrs</u>			6yrs	
Part 2: Give Details About	Monthly Income					
Estimate monthly income as of spouse unless you are separated if you or your non-filing spouse habelow. If you need more space, a	ave more than one employer	, combine the info				e a seguina de la compansión de la compa
:			Fo	r Debtor 1	For Debtor 2 or non-filling spouse	
List monthly gross wages, sal- deductions). If not paid monthly,			2. \$	221 A C C C C C C C C C C C C C C C C C C	\$	
3. Estimate and list monthly over	time pay.		3. + \$		+ \$	
4. Calculate gross income. Add li	ne 2 + line 3.		4. \$		\$	

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 39 of 57

Debtor 1 Allen B. Baker First Name Middle Name Last Name		Case number (if know	vn)	
		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	🗲 4	\$	\$	
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$	\$	
5b. Mandatory contributions for retirement plans	5b.	\$	\$	
5c. Voluntary contributions for retirement plans	5c.	\$	\$	
5d. Required repayments of retirement fund loans	5d.	\$	\$	
5e. Insurance	5e.	\$	\$	
5f. Domestic support obligations	5f.	\$	\$	
5g. Union dues	5g.	\$	\$	
5h. Other deductions. Specify:		+s	+ 6	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5	_		1 \$	
o. Add the payron deductions. Add lines 5a + 5b + 5c + 5d + 5e +5t + 5g + 5	5h. 6.	\$	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	\$	
List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	\$	
8b. Interest and dividends	8b.	\$	•	
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive		Ψ	Ψ	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$	
8d. Unemployment compensation	8d.	\$	\$	
8e. Social Security	8e.	\$	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
Specify:	_ 8f.	\$	\$	
8g. Pension or retirement income	8g.	\$	\$	
8h. Other monthly income. Specify: Short Term Disability	_ 8h. 1	+\$ <u>2,000.00</u>	+ \$	
Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	\$	
Calculate monthly income. Add line 7 + line 9.	Γ	\$ 2,000.00 +		0.000.0
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10.	\$_2,000.00 +	\$	<u> </u>
State all other regular contributions to the expenses that you list in Scheinclude contributions from an unmarried partner, members of your household, friends or relatives	edule J. your dep	endents, your roomm	ates, and other	THE PERSON NAMED IN COLUMN TO SERVICE OF THE PERSON NAMED IN COLUMN TO SERVICE
mends of feldaves.				
Do not include any amounts already included in lines 2-10 or amounts that are Specify:			ilisted in <i>Schedule J.</i> 11. +	•
Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain	e result is	the combined monthl	v income	\$2,000.0
Do you expect an increase or decrease within the year after you file this	form?			Combined monthly income
No.				
Yes. Explain:				

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 40 of 57

Do not list Debtor 1 and Debtor 2 age with you? Debtor 2 Do not state the dependents' each dependent	Debtor 1 Allen B. Baker First Name Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the Case number (If known) Official Form 106J Schedule J: Young Be as complete and accurate as part of the county of the coun	Middle Name Last Name Middle Name Last Name Northern District of Illinois CUR Expenses Dossible. If two married people are fill	A supplexpensions A supplexpensions A supplexpensions A supplemental A supplexpensions A supplexpensio	ended filing plement showing ses as of the form D / YYYY	12/15 ·
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents?	information. If more space is need	led, attach another sheet to this forn	n. On the top of any additional	pages, write yo	our name and case number
No. Goto line 2. Yes. Does Debtor 2 live in a separate household? No. Yes. Debtor 2 must file Official Form 106.1-2, Expenses for Separate Household of Debtor 2.	Part 1: Describe Your Ho	usehold			
Do not list Debtor 1 and Debtor 2 Dependent's relationship to Debtor 2. Do not state the dependents' peach dependent	✓ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a ☐ No		Separate Household of Debtor 2.		
De not state the dependents' No Yes No Yes De not state the dependents' No Yes No Yes De not state the dependents' No Yes De not state the dependents' No Yes No Yes De not state the dependents' No Yes De not state the dependents' No Yes De not state the dependents' No Yes No Yes De not state the dependents' No Yes No No Yes De not state the dependents' No Yes De not state the dependents' No Yes No No Yes De not state the dependents' No Yes De not state the dependents' No Yes No No Yes De not state the dependents' No Yes De not state the dependents' No Yes No No Yes No No Yes De not state the dependents' No Yes No No Yes De not state the dependents' No Yes No No Yes No No Yes No No Yes The rentate for no Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. If not included after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. If not included in or Schedule J: Your Income (Official Form 1061.) Your expenses as of a date after the bankruptcy is filed. If this is a					
Do your expenses include expenses of people other than yourself and your dependents? Settimate Your Ongoing Monthly Expenses	Do not state the dependents'		MP4 Merch MAT Conference resemble as a reservation of the Conference and European acceptance in the conference and the conferen	Section and the contraction of t	No No
3. Do your expenses include expenses of people other than yourself and your dependents? Settimate Your Ongoing Monthly Expenses					
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106i.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. \$ 0.00 Ac. Home maintenance, repair, and upkeep expenses					_ 160
3. Do your expenses include expenses of people other than yourself and your dependents? No Yes Setimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses					
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expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106i.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00	Part 2: Estimate Your Ongo	ing Monthly Expenses			
such assistance and have included it on Schedule I: Your Income (Official Form 106i.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 400.00 If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00	expenses as of a date after the bar applicable date.	kruptcy is filed. If this is a suppleme	ntal <i>Schedule J</i> , check the box		
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4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00		expenses for your residence. Include	first mortgage payments and	4. \$	400.00
4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00	If not included in line 4:				
4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00				4a. \$	
0.00					
4d. 5 0.00	· · ·	• • •		4c. \$ 4d. \$	0.00

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 41 of 57

Debtor 1 Allen B. Baker
First Name Middle Name Last Name Case number (if known)

				xpenses
5	. Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6	. Utilities:			
	6a. Electricity, heat, natural gas	6a,	\$	0.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	4.2.2.2
	6d. Other. Specify:	€d,	\$	0.00
7.	Food and housekeeping supplies	7.	\$	300.00
8.	Childcare and children's education costs	8.	s	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	150.00
10.	Personal care products and services	10.	\$	75.00
11.	Medical and dental expenses	11.	s	0.00
12.	Transportation. Include gas, maintenance, bus or train fare.		¥ <u></u>	
	Do not include car payments.	12.	\$	250.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	20.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	100.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	381.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	
18				
	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	······································	0.00
19	Other payments you make to support others who do not live with you.		Ψ	<u></u>
	Specify:	19.	\$	0.00
	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		Ψ	0.00
	20a. Mortgages on other property	e. 20a.	\$	0.00
	20b. Real estate taxes		\$	
	20c. Property, homeowner's, or renter's insurance	20b.	\$ \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20c. 20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20q. 20e.	\$ \$	
		200.	Ψ	<u> </u>

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 42 of 57

Debtor 1	Allen B. Baker First Name Middle Name Lest Name	Case number (if known)	**************************************	
21. Other	. Specify: Storage	21.	+\$	100.00
22. Calcu	late your monthly expenses.			
22a. A	dd lines 4 through 21.	22a .	\$	1,926.00
22b. C	opy fine 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0.00
22c. A	dd line 22a and 22b. The result is your monthly expenses.	22c.	\$	1,926.00
				en en minister, en 1, et 24a tambandambanan en majorgen, et 1, en p
23. Calcula	ite your monthly net income.			2 000 00
23a. C	copy line 12 (your combined monthly income) from Schedule I.	23a .	\$	2,000.00
23b. C	copy your monthly expenses from line 22c above.	23b.	-\$	1,926.00
	subtract your monthly expenses from your monthly income.		ę.	74.00
F	he result is your monthly net income.	23c .	Ψ	
For exa mortgag	expect an increase or decrease in your expenses within the year after you fi mple, do you expect to finish paying for your car loan within the year or do you expect to increase or decrease because of a modification to the terms of your	pect your		
☑ No. ☐ Yes.	Explain here:	e * A \$ 15 million as historialization of the complete is the specific property of gray, project, a		, ment with a first annual a factoring as fault a set of day perspectively as a sering 13 of annual
	The second secon			

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 43 of 57

	y your case:				
_{ebtor 1} Allen B. Baker	entire research and the research	5-15-4 (4-14-4)			
First Name	Middle Name	Last Name			
btor 2 ouse, if filing) First Name	Middle Name	Last Name	-		
ted States Bankruptcy Court for the	: Northern District of Illi	nois			
se number					
,				☐ Chec	k if this i
			····	amer	nded filing
Official Form 106D	ec				
Declaration A	hout an l	ndividual D	ebtor's Sche	duloc	
Jevial ativit A	wout an i	iidividdai b	entor a acrie	uules	12/1
two married people are filing	together, both are eq	ually responsible for sup	plying correct information.		
ou must file this form whenev	er vou file hankrunte	v echadulae or amondod	schedules. Making a false sta	stament sanasalina nasa	
ears, or both. 18 U.S.C. §§ 152			can result in fines up to \$250,	000, or imprisonment for	up to 20
	2, 1341, 1519, and 357	1.	can result in fines up to \$250,0		up to 20
Sign Below Did you pay or agree to pay	2, 1341, 1519, and 357	1.	an result in fines up to \$250,0		up to 20
Sign Below Did you pay or agree to pay	2, 1341, 1519, and 357	1.	fill out bankruptcy forms?		up to 20
Sign Below Did you pay or agree to pay	2, 1341, 1519, and 357	1.	fill out bankruptcy forms?		up to 20
Sign Below Did you pay or agree to pay No Yes. Name of person	someone who is NO	1. T an attorney to help you	fill out bankruptcy forms?	er's Notice, Declaration, and	up to 20
Sign Below Did you pay or agree to pay No Yes. Name of person Under penalty of perjury, I de	someone who is NO	1. T an attorney to help you	fill out bankruptcy forms? Attach Bankruptcy Petition Prepare Signature (Official Form 119).	er's Notice, Declaration, and	up to 20
Sign Below Did you pay or agree to pay No Yes. Name of person Under penalty of perjury, I detent they are true and correct	someone who is NO	1. T an attorney to help you d the summary and sche	fill out bankruptcy forms? Attach Bankruptcy Petition Prepare Signature (Official Form 119).	er's Notice, Declaration, and	up to 20
Sign Below Did you pay or agree to pay No Yes. Name of person Under penalty of perjury, I dethat they are true and correct	someone who is NO	1. T an attorney to help you d the summary and sche	fill out bankruptcy forms? Attach Bankruptcy Petition Prepare Signature (Official Form 119).	er's Notice, Declaration, and	up to 20
Sign Below Did you pay or agree to pay No Yes. Name of person Under penalty of perjury, I detent they are true and correct	someone who is NO	1. T an attorney to help you d the summary and sche	fill out bankruptcy forms? Attach Bankruptcy Petition Prepare Signature (Official Form 119).	er's Notice, Declaration, and	up to 20
Sign Below Did you pay or agree to pay No Yes. Name of person Under penalty of perjury, I dethat they are true and correct	someone who is NO	1. T an attorney to help you d the summary and sche	fill out bankruptcy forms? Attach Bankruptcy Petition Prepare Signature (Official Form 119).	er's Notice, Declaration, and	up to 20

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 44 of 57

Debtor 1 Allen B. Baker		1		
First Name Middle Name	Last Name			
Pebtor 2 Spouse, if filing) First Name Middle Name	Last Name			
inited States Bankruptcy Court for the: Northern District o	f Illinois			
ase number	***			
f known)				Check if this is a amended filing
fficial Forms 407				
fficial Form 107				
tatement of Financial Affai	irs for Indiv	viduals Filing	for Bankrupto	y 04/
What is your current marital status? Married				
□ Not married During the last 3 years, have you lived anywhere ✓ No □ Yes. List all of the places you lived in the last 3 Debtor 1:	years. Do not include Dates Debtor 1			Dates Debtor 2
During the last 3 years, have you lived anywhere No Yes. List all of the places you lived in the last 3	years. Do not include	where you live now.		Dates Debtor 2 lived there 3 Same as Debtor
During the last 3 years, have you lived anywhere ✓ No ☐ Yes. List all of the places you lived in the last 3 Debtor 1:	years. Do not include Dates Debtor 1	e where you live now. Debtor 2:		lived there
During the last 3 years, have you lived anywhere No Yes. List all of the places you lived in the last 3	years. Do not include Dates Debtor 1 lived there	e where you live now. Debtor 2:		lived there
During the last 3 years, have you lived anywhere ✓ No ☐ Yes. List all of the places you lived in the last 3 Debtor 1:	years. Do not include Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1		lived there Same as Debtor From
During the last 3 years, have you lived anywhere No Pebtor 1: Number Street	years. Do not include Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1 Number Street	State 7/D Code	lived there Same as Debtor From
During the last 3 years, have you lived anywhere ✓ No ☐ Yes. List all of the places you lived in the last 3 Debtor 1:	years. Do not include Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1 Number Street	State ZIP Code	lived there Same as Debtor From To
During the last 3 years, have you lived anywhere No Yes. List all of the places you lived in the last 3 Debtor 1: Number Street	years. Do not include Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1 Number Street	State ZIP Code	lived there Same as Debtor From To
During the last 3 years, have you lived anywhere No Yes. List all of the places you lived in the last 3 Debtor 1: Number Street	years. Do not include Dates Debtor 1 lived there From To From	Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1	e established a service and a	Same as Debtor From To Same as Debtor
During the last 3 years, have you lived anywhere No Yes. List all of the places you lived in the last 3 Debtor 1: Number Street	years. Do not include Dates Debtor 1 lived there From To From	Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1	State ZIP Code	Same as Debtor From To Same as Debtor
During the last 3 years, have you lived anywhere No Yes. List all of the places you lived in the last 3 Debtor 1: Number Street	years. Do not include Dates Debtor 1 lived there From To From From	Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1	e established a service and a	Iived there Same as Debtor From To Same as Debtor
During the last 3 years, have you lived anywhere No See List all of the places you lived in the last 3 Debtor 1: Number Street City State ZIP Code	years. Do not include Dates Debtor 1 lived there From To From From	Same as Debtor 1 Number Street City Same as Debtor 1 Number Street		Same as Debtor To Same as Debtor From To From
During the last 3 years, have you lived anywhere No Yes. List all of the places you lived in the last 3 Debtor 1: Number Street	years. Do not include Dates Debtor 1 lived there From To From From	Debtor 2: Same as Debtor 1 Number Street City Same as Debtor 1	e established a service and a	Iived there Same as Debtor From To Same as Debtor From From
During the last 3 years, have you lived anywhere No See List all of the places you lived in the last 3 Debtor 1: Number Street City State ZIP Code	pouse or legal equiv	Same as Debtor 1 Number Street City Same as Debtor 1 Number Street City City	State ZIP Code	Same as Debtor From To Same as Debtor From To

Part 2: Explain the Sources of Your Income

Official Form 107

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 45 of 57

ebtor 1 Allen B. Baker First Name Middle Name Las	t Name	Case n	umber (if known)	
4. Did you have any income from employme Fill in the total amount of income you receive If you are filing a joint case and you have inc	ed from all jobs and all busi	inesses, including part-ti	me activities.	endar years?
Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of Income Check all that apply.	Gross income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
ter en	Operating a business		Operating a business	er e e e e e e e e e e e e e e e e e e
For last calendar year:	Wages, commissions, bonuses, tips	¢	Wages, commissions, bonuses, tips	œ.
(January 1 to December 31, 2017	Operating a business	Ψ <u></u>	Operating a business	a
For the calendar year before that:	₩ Wages, commissions,		☐ Wages, commissions,	
(January 1 to December 31, 2016	bonuses, tips Operating a business	\$	bonuses, tips Operating a business	\$
gambling and lottery winnings. If you are filing List each source and the gross income from e				under Debtor 1.
Yes. Fill in the details.	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Disability	\$ <u>8,000.00</u>		\$
		\$		\$
For last calendar year:		-		\$
(January 1 to December 31, 2017)	\$			\$ \$
and a state of the second of t	the state of the s			
For the calendar year before that:	\$			\$
(January 1 to December 31, 2016 YYYY	\$			\$

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 46 of 57

btor 1		Baker Middle Name	Last Name			Case number	(if known)	
Part 3:	List Certain	Payments Y	ou Made Bef	ore You File	ed for Bankru	iptcy		
. Are eitl	ther Debtor 1's o	or Dehtor 2's c	lahte nrimarily	concumor d	nhte2			
□ NO.	incurred by ai	i maividuai prin	naniy for a perso	onal, family, o	r household pur	pose."	ed in 11 U.S.C. § 101	(8) as
	During the 90	days before yo	u filed for bankrı	uptcy, did you	pay any credito	r a total of \$6,42	5* or more?	
	No. Go to I	ine 7.						
	total a	mount you par	a that creditor. L	Jo not include	: bavments for d	ore in one or mon omestic support forney for this bar	e payments and the	
	* Subject to ad	justment on 4/0)1/19 and every	3 years after	that for cases fi	led on or after the	date of adjustment.	
🗹 Yes	s. Debtor 1 or De						•	
						a total of \$600 o	r more?	
	No. Go to li							
	Yes. List be credite	elow each credi or. Do not inclu	de payments tor	r domestic sur	oport obligations	euch se child ei	ount you paid that	
	alimor	y. Also, do not	include paymer	nts to an attor	ney for this bank	ruptcy case.		
				Dates of payment	Total amour	it paid Am	ount you still owe	Was this payment for
					<u> </u>	\$		☐ Mortgage
	Creditor's Na	ne .						☐ Car
	Number St	reet	***************************************		-			Credit card
								Loan repayment
	***************************************	***************************************			•			Suppliers or vendors
	City	State	ZIP Code					Other
	Charles and Assumer	the transfer of the transfer of	to extensive events of the con-		e en opening op	tera in de la reconstrucción de la construcción de la construcción de la construcción de la construcción de la	man mark a same a same na sama a sama	
					\$	\$		☐ Mortgage
	Creditor's Nan	10						Car
	Number Str	eet						Credit card
								Loan repayment
	***************************************							☐ Suppliers or vendors
	City	State	ZIP Code					Other
er vers valeur fred	errere e a escribar atamén atamén (1)	adamental angkakasan		periode en la conferencia de la conferencia del la conferencia del la conferencia del la conferencia de la conferencia de la conferencia del la	ner iking Amerikan dinerer	and during any deposition to the	egisti olimisidinistettisi olehisiosi tiitak	
						and the second second second second	ann Chair anns Christer	an da nama a militar da da sa
						•		
	Creditor's Nam	8			\$	<u> </u>		Mortgage Mortgage
	Creditor's Nam	e			\$	\$ <u></u>		☐ Mortgage ☐ Car
	Creditor's Nam				\$	<u> </u>		
					\$	\$		☐ Car
					\$	*		☐ Car ☐ Credit card

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 47 of 57

	First Name	Baker Middle Name		Last Name			Case number (if known)
Inside corpor agent, such a	ers include you rations of whic , including one as child suppor	r relatives; a th you are ar for a busine	iny genera n officer, d ess you op	al partners; irector, per	relatives of a	ny general partners; , or owner of 20% or	partnerships of whi	who was an insider? ch you are a general partner; g securities; and any managing or domestic support obligations,
⊠ No □ Ye	o es. List all payr	nents to an i	insider.					
					Dates of payment		Amount you still owe	Reason for this payment
Ĩŕ	nsider's Name	······································	***************************************			<u> </u>	_ \$	
N	lumber Street			•				
_		-	01.4		_	<u></u>		
C	ity		State Z	ZIP Code	. 			The second secon
īn	nsider's Name	· · · · · · · · · · · · · · · · · · ·			<u> </u>	\$	\$	
N	umber Street	***************************************		·····	-	_		
	····							
Ci	ity	·	State Z	IP Code	-			
								1970-1971 - 1971
n insi Iclude	ider? payments on					payments or trans	ifer any property o	n account of a debt that benefited
n insi nclude 1 No	ider? payments on	debts guara	inteed or o	cosigned by	y an insider.	es in declaration of the	on all of the Marketine	
n insi Iclude 1 No	ider? payments on	debts guara	inteed or o	cosigned by		Total amount	on all of the Marketine	n account of a debt that benefited Reason for this payment include creditor's name
n insi nclude 1 No 1 Yes	ider? payments on	debts guara	inteed or o	cosigned by	y an insider. Dates of	Total amount	Amount you still	Reason for this payment
n insinclude No Yes	ider? payments on s. List all paym	debts guara	inteed or o	cosigned by	y an insider. Dates of	Total amount	Amount you still	Reason for this payment
n insinclude No Yes	ider? payments on s. List all paym sider's Name	debts guara	nteed or o	cosigned by	y an insider. Dates of payment	Total amount paid	Amount you still owe	Reason for this payment include creditor's name
n insi n insi No 1 No 1 Yes	ider? payments on s. List all paym siders Name	debts guara	nefited an	cosigned by	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment include creditor's name
n insi	ider? payments on s. List all paym sider's Name	debts guara	nefited an	cosigned by insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment include creditor's name
insininsininclude No N	ider? payments on s. List all paym sider's Name	debts guara	nefited an	cosigned by insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
in Insinctude No No Yes	ider? payments on s. List all paym siders Name	debts guara	nefited an	cosigned by insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment include creditor's name

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 48 of 57

Allen B. Baker First Name Middle Name Last Nam	Case number (if known)	
Identify Legal Actions, Reposses	ssions, and Foreclosures	
hin 1 year before you filed for bankruptcy.	Were you a party in any lawsuit court action, or administrative access	edina?
all such matters, including personal injury ca contract disputes.	ases, small claims actions, divorces, collection suits, paternity actions, supp	ort or custody modifica
No	•	
No Yes. Fill in the details.		
	<u></u>	Ngjarjan
F	lature of the case Court or agency	Status of the cas
Case title		Pending
	Court Name	On appeal
	Number Street	Concluded Concluded
Case number		Concluded
	City State ZIP Code	
		en e
Case title	Court Name	— Pending
		On appeal
	Number Street	Concluded
Case number		
<u>}</u>	City State ZIP Code	***************************************
	Describe the property Date	Value of the property
Creditor's Name		\$
Number Street	Explain what happened	
	Property was repossessed.	
	Property was foreclosed.	
City State ZIP Code	Property was garnished.	
City State ZIP Code	Property was attached, seized, or levied.	enin 18 samuelli V valisteks sengenas karaman araman eng en bis vinsamin en belginka karama
and particles with the filter of the section of the contract of the contract of the contract of the contract of	Describe the property Date	Value of the property
		term and commercial commercial activity of the following property of the commercial comm
Creditor's Name		tit men it terminen er er men er konstruktioner gete sykkelem fingere er kon
		\$
		\$
Number Street	Explain what happened	\$
Number Street	mapount with happened	\$
Number Street	Property was repossessed.	\$
	Property was repossessed. Property was foreclosed.	\$
Number Street City State ZIP Code	Property was repossessed.	\$

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 49 of 57

1 Allen B. Baker First Name Middle Name Lai	st Name Case number (if known)	
ithin 90 days before you filed for bankri	uptcy, did any creditor, including a bank or financial institu	tion, set off any amounts from you
counts or refuse to make a payment be	ecause you owed a debt?	
No		
Yes. Fill in the details.		
	Describe the action the creditor took	Date action Amount
Creditor's Name		was taken
Number Street	-	\$
	_	
	The second secon	
City State ZIP Code	Last 4 digits of account number: XXXX	
thin 1 year before you filed for bankrup	tcy, was any of your property in the possession of an assig	nee for the benefit of
editors, a court-appointed receiver, a cu	stodian, or another official?	
No		
Yes		
The Contain Ciffs and Co. 1		
5: List Certain Gifts and Contribu	ıtions	
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave Value the gifts
		\$
Person to Whom You Gave the Gift		
	-	\$
		T
Number Street	•	,
City State ZIP Code		
Person's relationship to you	!	
and the second s		l Nasana ang taon sa
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave Value
entre province in the second s		the gifts
Secret to Many Van Co.	I	\$
Person to Whom You Gave the Gift		T MINTERPOLITATION TO MINT
	ſ	\$
		7
Number Street		
Ath.		
City State ZIP Code		
Person's relationship to you		

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 50 of 57

otor 1 Allen B. Baker First Name Middle Name Li	asi Name Case number (if known)		
. Within 2 years before you filed for bankri	uptcy, did you give any gifts or contributions with a total val	ue of more than \$600 to	any charity?
✓ No✓ Yes. Fill in the details for each gift or co	ntribution.		
	The Artifact of State of the St	. And the same of America	tana managan
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you Valu contributed	ue
Charity's Name	-		
	_	\$	
Number Street	-		
City State ZIP Code			
1 6: List Certain Losses			
■ Yes. Fill in the details. Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your Value loss lost	e of property
			was in the way for the fi
		\$ <u></u>	
7. List Certain Payments or Tran	sfers		
ou consulted about seeking bankruptcy on clude any attorneys, bankruptcy petition pre	ccy, did you or anyone else acting on your behalf pay or tran or preparing a bankruptcy petition? eparers, or credit counseling agencies for services required in yo		one
No Yes. Fill in the details.			
ngladifenninilladfa nggagaan magarantan sa a sa an a salitang sa g	Description and value of any property transferred	Date payment or Amou transfer was	nt of payment
Person Who Was Paid		made	
Number Street			
The state of the s		<u> </u>	···
City State ZIP Code			
Email or website address			
Person Who Made the Payment if Not You			

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 51 of 57

	Description and value of any property		Date payment or ransfer was made	Amount of payment
Person Who Was Paid		1		
Number Street		-		\$
**************************************		***		5
City State ZIP Code	_			
Email or website address				
Person Who Made the Payment, if Not You	-			
not include any payment or transfer that No Yes. Fill in the details.	ditors or to make payments to your cred you listed on line 16.			
	Description and value of any property tr		ite payment or A	mount of paym
Person Who Was Paid			de	
Number Street	_ !		\$	
Number Street	- :		\$_ \$	
City State ZIP Code thin 2 years before you filed for bankru		anefor any property to our	\$_ \$_	
City State ZIP Code thin 2 years before you filed for bankru	made as security (such as the granting of		age on your proper	
City State ZIP Code thin 2 years before you filed for bankru nsferred in the ordinary course of your ude both outright transfers and transfers not include gifts and transfers that you ha	made as security (such as the granting of ave already listed on this statement. Description and value of property transferred	a security interest or mortg	age on your proper	ty). Date transfer
City State ZIP Code thin 2 years before you filed for bankru nsferred in the ordinary course of your ude both outright transfers and transfers not include gifts and transfers that you ha No Yes. Fill in the details.	made as security (such as the granting of ave already listed on this statement. Description and value of property transferred	a security interest or mortg	age on your proper	ty). Date transfer
City State ZIP Code thin 2 years before you filed for bankru nsferred in the ordinary course of your ude both outright transfers and transfers not include gifts and transfers that you ha No Yes. Fill in the details. Person Who Received Transfer	made as security (such as the granting of ave already listed on this statement. Description and value of property transferred	a security interest or mortg	age on your proper	Date transfer was made
City State ZIP Code thin 2 years before you filed for bankru insferred in the ordinary course of your ude both outright transfers and transfers not include gifts and transfers that you ha No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code	made as security (such as the granting of ave already listed on this statement. Description and value of property transferred	a security interest or mortg	age on your proper	Date transfer was made
City State ZIP Code thin 2 years before you filed for bankru nsferred in the ordinary course of your ude both outright transfers and transfers not include gifts and transfers that you ha No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	made as security (such as the granting of ave already listed on this statement. Description and value of property transferred	a security interest or mortg	age on your proper	Date transfer was made
City State ZIP Code thin 2 years before you filed for bankru insferred in the ordinary course of your ude both outright transfers and transfers not include gifts and transfers that you ha No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	made as security (such as the granting of ave already listed on this statement. Description and value of property transferred	a security interest or mortg	age on your proper	Date transfer was made
City State ZIP Code thin 2 years before you filed for bankru nsferred in the ordinary course of your ude both outright transfers and transfers not include gifts and transfers that you ha No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	made as security (such as the granting of ave already listed on this statement. Description and value of property transferred	a security interest or mortg	age on your proper	Date transfer was made

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 52 of 57

	Allen B. Baker First Name Middle Name L	ast Name	Case number (if know	sn)	
W	ithin 10 years before you filed for bank	ruptcy, did you transfer any prope	rty to a self-settled trus	t or similar device of	which you
ar	e a beneficiary? (These are often called	asset-protection devices.)		to ominar acrice of	winen you
	Í No				
	Yes. Fill in the details.				
		est than be write a control of the sample			
		Description and value of the prop	erty transferred		Date transfer was made
				Access to the control of the control	
	Name of trust	·			
	Western Committee Committe	-	ninge of 1, at 1, other and 1		The second secon
			. magain 1.5, a. Turkda an al. 1. summaning groups ()	Topin it a feet to the second	
rt :	8: List Certain Financial Accoun	its. Instruments. Safe Deposit	Boxes, and Storage	IInite	**************************************
Nii Ni	thin 1 year before you filed for bankru	ptcy, were any financial accounts	or instruments held in y	our name, or for your	benefit,
	osed, sold, moved, or transferred? clude checking, savings, money marke	t or other financial accounts: cort	ificator of dangeit, above	an in tanka andre	-)
orc	okerage houses, pension funds, coope	eratives, associations, and other fi	micates of deposit; snar nancial institutions.	es in banks, credit ur	nions,
Z	No				
	Yes. Fill in the details.				
		Last 4 digits of account number	Type of account or	Date account was	AND
			instrument	closed, sold, moved, or transferred	Last balance before closing or transfer
	Name of Financial Institution		☐ Checking		s
	Number Street		☐ Savings	# ************************************	Ψ
			Money market		
	**************************************		· ·		
			L. Brokerage		
	City State ZiP Code	-	☐ Brokerage		
	City State ZIP Code	- 	☐ Brokerage		
	City State ZIP Code	- 	Other		
	City State ZIP Code Name of Financial Institution	XXXX	Other_	V ^M ····································	\$
	Name of Financial Institution		☐ Other		\$
			☐ Other ☐ Checking ☐ Savings ☐ Money market		\$
	Name of Financial Institution	_ XXXX	☐ Other ☐ Checking ☐ Savings ☐ Money market ☐ Brokerage		\$
	Name of Financial Institution		☐ Other ☐ Checking ☐ Savings ☐ Money market	· ·	\$
	Name of Financial Institution	XXXX	☐ Other ☐ Checking ☐ Savings ☐ Money market ☐ Brokerage	-	\$
101	Name of Financial Institution Number Street City State ZIP Code		☐ Other ☐ Checking ☐ Savings ☐ Money market ☐ Brokerage ☐ Other	v or other dense is	\$
ec:	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within aurities, cash, or other valuables?	- - 1 year before you filed for bankrup	Other Checking Savings Money market Brokerage Other	-	
ec 4	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within aurities, cash, or other valuables?		Other Checking Savings Money market Brokerage Other	-	
ec Z	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within aurities, cash, or other valuables?	- - 1 year before you filed for bankrup	Other Checking Savings Money market Brokerage Other	-	
ec Z	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within aurities, cash, or other valuables?	- - 1 year before you filed for bankrup	Other Checking Savings Money market Brokerage Other		Do you still
ec Z	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within aurities, cash, or other valuables?	1 year before you filed for bankrup	Other Checking Savings Money market Brokerage Other		
ec Z	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within aurities, cash, or other valuables?	1 year before you filed for bankrup	Other Checking Savings Money market Brokerage Other		Do you still have it?
ec Z	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within aurities, cash, or other valuables?	1 year before you filed for bankrup	Other Checking Savings Money market Brokerage Other		Do you still have it?
ZÍ I	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within a urities, cash, or other valuables? No Yes. Fill in the details.	1 year before you filed for bankrup Who else had access to it?	Other Checking Savings Money market Brokerage Other		Do you still have it?
ec Z	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within rurities, cash, or other valuables? No Yes. Fill in the details.	1 year before you filed for bankrup Who else had access to it?	Other Checking Savings Money market Brokerage Other		Do you still have it?
ec Z	Name of Financial Institution Number Street City State ZIP Code you now have, or did you have within a urities, cash, or other valuables? No Yes. Fill in the details.	1 year before you filed for bankrup Who else had access to it?	Other Checking Savings Money market Brokerage Other		Do you still have it?

ZIP Code

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 53 of 57

	llen B. Baker Irst Name Middle Name	Last Name	Case number (if know	٧n) <u>. </u>	
W 140		unit or place other than your hon	e within 1 year before you f	iled for bankruptcy?	
Yes. Fi	II in the details.				
		Who else has or had access (o it? Describe the	contents	Do you stil have it?
Name (of Storage Facility	Name			□ No □ Yes
Numbe	er Street	Number Street			
		City State ZIP Code			denders on negrovAles
City Part 9:	State ZIP Cod	eld or Control for Someone E			
23. Do you ho		at someone else owns? Include a		rom, are storing for,	
	ll in the details.	uuu oo	to the terms of the second		
		Where is the property?	Describe the	property	Value
Owner's	s Name			en Villabeta mining ja	\$
Number	Street	Number Street		to months of the administration	
City	State ZIP Code	City State	ZIP Code		
	ive Details About Enviro				
······					
Environmer hazardous	a, tawa annathiras, Masies	emitions apply: state, or local statute or regulatio , or material into the air, land, soi blling the cleanup of these substa	CUITORA WATER APALIANINA	amination, releases of er, or other medium,	
Site means	any location, facility, or pro-	perty as defined under any environize it, including disposal sites.		ow own, operate, or	
Hazardous i	material means anything an	environmental law defines as a h nt, contaminant, or similar term.	azardous waste, hazardous	substance, toxic	
		gs that you know about, regardle	ss of when they occurred.		
		that you may be liable or potentia		n of an environmental law	?
Yes. Fill	in the details.				
		Governmental unit	Environmental law, if you I	(now it Dat	te of notice
Name of site	e	Governmental unit		-	
Number S	itraet	Number Street			
		City State ZiP Code	_		
CHV	State 7in O. J.	-			

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 54 of 57

	Last Name		Case nur	mber (if known)	
ave you notified any government.					
ave you notified any governmental un No	iit of any release of ha	zardous materia	al?		
2 No 2 Yes. Fill in the details.					
es. Fill iff the details,	_	eration and			
	Governmental unit		Environmenta	l law, if you know it	Date of notic
Name of site	Governmental unit				
Number Street		<u> </u>	**************************************	e i nomen e una proprieta de la composição	
	Number Street				
	City St	ate ZIP Code			
City State 7IP Code		ate ZIP Code			
City State ZIP Code					
ive you been a party in any judicial or	administrative proces	dina undor anu			e and the ferror of the property of the first property and never the property of
No	p. 0000	ang ander any	environmenta	i law? include setti	ements and orders.
Yes. Fill in the details.					
	Court or agency			in the state of the state of	All Salar and Company
	Court or agency		Nature of	the case	Status of th
Case title					
	Court Name		- ·		Pending
					On appe
	Number Street		_		Conclud
Case number					
	City	State ZIP Code	-		
11 Give Details About Your Bu					
hin 4 years before you filed for bankru	uptcy, did you own a b	usiness or have	any of the fo	llowing connection	s to any business?
☐ A member of a limited liability con☐ A partner in a partnership☐ An officer, director, or managing e	n a trade, profession npany (LLC) or limited executive of a corporal	n, or other activ I liability partnei tion	ity, either full- rship (LLP)	llowing connection time or part-time	s to any business?
☐ A member of a limited liability con ☐ A partner in a partnership ☐ An officer, director, or managing e ☐ An owner of at least 5% of the voti	in a trade, profession npany (LLC) or limited executive of a corporal ing or equity securities	n, or other activ I liability partnei tion	ity, either full- rship (LLP)	llowing connection time or part-time	s to any business?
A member of a limited liability con A partner in a partnership An officer, director, or managing e An owner of at least 5% of the voti	in a trade, profession in a trade, profession in a trade profession in a corporating or equity securities part 12.	n, or other activ I liability partner tion s of a corporatio	ity, either full- ship (LLP) on	llowing connection time or part-time	s to any business?
☐ A member of a limited liability con ☐ A partner in a partnership ☐ An officer, director, or managing e ☐ An owner of at least 5% of the voti	an a trade, profession pany (LLC) or limited executive of a corporating or equity securities Part 12.	n, or other activ liability partner tion s of a corporation	ity, either full- ship (LLP) on	time or part-time	
A member of a limited liability con A partner in a partnership An officer, director, or managing e An owner of at least 5% of the voti No. None of the above applies. Go to F Yes. Check all that apply above and fil	in a trade, profession in a trade, profession in a trade profession in a corporating or equity securities part 12.	n, or other activ liability partner tion s of a corporation	ity, either full- ship (LLP) on	time or part-time	ation number
A member of a limited liability con A partner in a partnership An officer, director, or managing e An owner of at least 5% of the voti	an a trade, profession pany (LLC) or limited executive of a corporating or equity securities Part 12.	n, or other activ liability partner tion s of a corporation	ity, either full- ship (LLP) on	time or part-time	
A member of a limited liability con A partner in a partnership An officer, director, or managing e An owner of at least 5% of the voti No. None of the above applies. Go to F Yes. Check all that apply above and fil Business Name	an a trade, profession pany (LLC) or limited executive of a corporating or equity securities Part 12.	n, or other activ liability partner tion s of a corporation	ity, either full- ship (LLP) on	time or part-time	ation number cial Security number or ITIN.
A member of a limited liability con A partner in a partnership An officer, director, or managing e An owner of at least 5% of the voti No. None of the above applies. Go to F Yes. Check all that apply above and fil	an a trade, profession npany (LLC) or limited executive of a corporation ing or equity securities Part 12. Il in the details below to Describe the nature	n, or other activ I liability partner tion s of a corporation for each busine of the business	ity, either full- ship (LLP) on	Employer Identific Do not include Soc	ation number cial Security number or ITIN.
A member of a limited liability con A partner in a partnership An officer, director, or managing e An owner of at least 5% of the voti No. None of the above applies. Go to F Yes. Check all that apply above and fil Business Name	an a trade, profession pany (LLC) or limited executive of a corporating or equity securities Part 12.	n, or other activ I liability partner tion s of a corporation for each busine of the business	ity, either full- ship (LLP) on	Employer Identific Do not include Soc	ation number cial Security number or ITIN.
A member of a limited liability con A partner in a partnership An officer, director, or managing e An owner of at least 5% of the voti No. None of the above applies. Go to F Yes. Check all that apply above and fil Business Name	an a trade, profession npany (LLC) or limited executive of a corporation ing or equity securities Part 12. Il in the details below to Describe the nature	n, or other activ I liability partner tion s of a corporation for each busine of the business	ity, either full- ship (LLP) on	Employer Identific Do not include Soc EIN: Dates business ex	ation number sial Security number or ITIN. sted
A member of a limited liability con A partner in a partnership An officer, director, or managing e An owner of at least 5% of the voti No. None of the above applies. Go to F Yes. Check all that apply above and fil Business Name	npany (LLC) or limited executive of a corporating or equity securities Part 12. If in the details below to Describe the nature of accountant	n, or other activ I liability partner tion s of a corporatio for each busine of the business or bookkeeper	ity, either full- ship (LLP) on	Employer Identific Do not include Soc EIN: Dates business ex	ation number cial Security number or ITIN.
A member of a limited liability con A partner in a partnership An officer, director, or managing e An owner of at least 5% of the voti No. None of the above applies. Go to F Yes. Check all that apply above and fil Business Name Number Street	an a trade, profession npany (LLC) or limited executive of a corporation ing or equity securities Part 12. Il in the details below to Describe the nature	n, or other activ I liability partner tion s of a corporatio for each busine of the business or bookkeeper	ity, either full- ship (LLP) on	Employer Identific Do not include Soc EIN: Dates business ex From	ation number tial Security number or ITIN. sted To tion number
A member of a limited liability con A partner in a partnership An officer, director, or managing e An owner of at least 5% of the voti No. None of the above applies. Go to F Yes. Check all that apply above and fil Business Name Number Street	npany (LLC) or limited executive of a corporating or equity securities Part 12. If in the details below to Describe the nature of accountant	n, or other activ I liability partner tion s of a corporatio for each busine of the business or bookkeeper	ity, either full- ship (LLP) on	Employer Identific Do not include Soc EIN: Dates business ex From	ation number tial Security number or ITIN. sted
A member of a limited liability com A partner in a partnership An officer, director, or managing e An owner of at least 5% of the voti No. None of the above applies. Go to F Yes. Check all that apply above and fil Business Name Number Street City State ZIP Code	npany (LLC) or limited executive of a corporating or equity securities Part 12. If in the details below to Describe the nature of accountant	n, or other activ I liability partner tion s of a corporatio for each busine of the business or bookkeeper	ity, either full- ship (LLP) on	Employer Identific Do not include Soc EIN: Dates business ex From Employer Identification	ation number tial Security number or ITIN. sted To tion number
A member of a limited liability com A partner in a partnership An officer, director, or managing e An owner of at least 5% of the voti No. None of the above applies. Go to F Yes. Check all that apply above and fil Business Name Number Street City State ZIP Code	npany (LLC) or limited executive of a corporating or equity securities Part 12. If in the details below to Describe the nature Name of accountant Describe the nature of	n, or other activ I liability partner tion s of a corporatio for each busine of the business or bookkeeper	ity, either full- ship (LLP) on	Employer Identific Do not include Soc EIN: Dates business ex From Employer Identifica Do not include Soc EIN:	ation number cial Security number or ITIN. sted To tion number ial Security number or ITIN.
A member of a limited liability com A partner in a partnership An officer, director, or managing e An owner of at least 5% of the voti No. None of the above applies. Go to F Yes. Check all that apply above and fil Business Name Number Street City State ZIP Code	npany (LLC) or limited executive of a corporating or equity securities Part 12. If in the details below to Describe the nature of accountant	n, or other activ I liability partner tion s of a corporatio for each busine of the business or bookkeeper	ity, either full- ship (LLP) on	Employer Identific Do not include Soc EIN: Dates business ex From Employer Identification	ation number cial Security number or ITIN. sted To tion number ial Security number or ITIN.
A member of a limited liability com A partner in a partnership An officer, director, or managing e An owner of at least 5% of the voti No. None of the above applies. Go to F Yes. Check all that apply above and fil Business Name Number Street City State ZIP Code	npany (LLC) or limited executive of a corporating or equity securities Part 12. If in the details below to Describe the nature Name of accountant Describe the nature of	n, or other activ I liability partner tion s of a corporatio for each busine of the business or bookkeeper	ity, either full- ship (LLP) on	Employer Identific Do not include Soc EIN: Dates business ex From Employer Identifica Do not include Soc EIN:	ation number cial Security number or ITIN. sted To tion number ial Security number or ITIN.

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 55 of 57

btor 1 Allen B. Baker First Name Middle Name Last	Name Case numb	er (if known)
and the second of the second o	Describe the nature of the business	Employer Identification number
Business Name	Commence of the Commence of th	Do not include Social Security number or ITIN.
		EIN:
Number Street	Name of accountant or bookkeeper	Dates business existed
		-
City State ZIP Code		From To
Nithin 2 years before you filed for bankrupt nstitutions, creditors, or other parties. ☑ No	tcy, did you give a financial statement to anyone a	bout your business? Include all financial
☑ No ☑ Yes. Fill in the details below.		
_ voor in vi tilo dotallo below.		
	Date issued	
Name	MM / DD / YYYY	
Number Street		
City State ZIP Code		
12: Sign Below		
	of Financial Affairs and any attachments, and I decided that making a false statement, concealing propert esult in fines up to \$250,000, or imprisonment for	
Signature of Debtor 1	Signature of Debtor 2	
Date 5 08 2018	Date	
id you attach additional pages to Your Sta	tement of Financial Affairs for Individuals Filing fo	
Í No I Yes		Camara Spray (Camara Carrier 107)1
d you pay or agree to pay someone who is	s not an attorney to help you fill out bankruptcy fo	rms?
No		
res. Name or person	Attach Declar	the Bankruptcy Petition Preparer's Notice, ration, and Signature (Official Form 119).

Case 18-13452 Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 56 of 57

Section 1995		your case.		
Debtor 1	Allen B.	Baker		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Co	ourt for the: Northern District of Illinois		
Case number				
(If known)				•

Official Form 108

Fill in this information to identify

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: Nationwide Cassel LLC	☐ Surrender the property.	□ No
Description of Automobile property securing debt:	 □ Retain the property and redeem it. ☑ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	☑ Yes
Creditor's name: Description of	☐ Surrender the property. ☐ Retain the property and redeem it.	☐ No ☐ Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	— 165
Creditor's name:	☐ Surrender the property.	□ No
Description of property securing debt:	□ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	Yes
Creditor's name: Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	☐ No ☐ Yes

Doc 1 Filed 05/08/18 Entered 05/08/18 13:37:32 Desc Main Document Page 57 of 57 Case 18-13452

Allen B. Baker

	e your unexpired personal property leases	Will the lease be assumed?
Lessor's		□ No
Description	on of leased	☐ Yes
_essor's i	name:	□ No
Description or operty:	on of leased	Yes
_essor's r		□ No
Description or operty:	on of leased	☐ Yes
essor's r	name:	□No
Description or operty:	on of leased	Yes
.essor's r		□No
	on of leased	Yes
essor's n	name:	□ No
escriptio roperty:	on of leased	Yes
essor's n	name:	□ No
escriptio roperty:	on of leased	☐ Yes
na kalindrahamaninka udan dan Kilinadi na d		
***************************************	Sign Below	